

**THE EFFECT OF PERSONAL IDENTITY OF
ADULT CHILDREN OF ALCOHOLICS
ON PASTORAL LEADERSHIP**

A THESIS

SUBMITTED TO THE FACULTY OF

GORDON-CONWELL THEOLOGICAL SEMINARY

IN PARTIAL FULFILLMENT OF REQUIREMENTS FOR THE DEGREE

DOCTOR OF MINISTRY

BY

RAYMOND A. RICHARDS II

MAY 2008

Dedication

I dedicate this project to my father, Raymond A. Richards I. His conversion to Christ at 56 years of age had a profound impact upon my life and confirmed the power of the gospel. His salvation allowed me the privilege years later of being able to receive a father's blessing when the call of God to pastoral ministry was birthed within my heart.

I also dedicate this project to all the pastors who were willing to open up their hearts and lives to me during the interview process. Your stories have enriched my life and I pray through this project they will enrich others as well.

Finally, I dedicate this project to my precious wife, Giselle, and to our wonderful children, David, Jonathan, Benjamin and Hannah. Your support and perseverance over the past five years have been appreciated more than you know.

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Acknowledgments

I would like to thank the board and congregation of Calvary Assembly of God for your support and prayers, without which this project would never have been completed. It has been a privilege to serve as your pastor these last seventeen and a half years.

I would also like to thank Dr. Duane Durst, NY District of the Assemblies of God Superintendent, for providing the support of your office in the early stages of this project. Thank you also to Dr. Bryan Auday for the many hours you provided to me in guidance and encouragement as I developed the tools for the screening instrument and the interviews. Thank you to Dr. Randy Frost, Dr. Ann Potter, Dr. Albert Mehrabian, Pastor Pete Scazzaro, and Dr. Simon Baron-Cohen for the use of your testing instruments in the interview process. They proved invaluable. I greatly appreciated both your willingness to share your work and the collegiality with which they were given.

I want to thank Dr. Kenneth L. Swetland, as well, for his guidance, support and wisdom as my thesis advisor. Thank you also to Dr. Scott Gibson for serving as my reader for the project.

Finally, thank you Lord Jesus Christ for your grace, truth and healing which you brought to me through this process. I bow in humble praise and adoration. Amen!

Abstract

Abstract: This thesis asserts that there are common characteristics (*both positive and negative*) of adult children of alcoholics (ACOA) that impact pastoral leadership. Of the many characteristics/traits ACOA have in common, five are the subject of this thesis: conflict avoidance, people pleasing, perfectionism, empathy and sensitivity. After providing an overview of the ACOA condition and defining the five characteristics under consideration, this study turns to the development of a biblical and theological framework for understanding the issue with a focus on the importance of the inner emotional and spiritual life of the pastor, the dangers of viewing Scripture through a distorted ACOA lens, the importance of proper motivation for ministry, and the call to the church to live as a healthy family of God. A literature review follows, exploring both the clinical and empirical fields of study, as well as noting the dearth of materials directed towards pastors who, themselves, are children of alcoholics. The two-phase project design first identifies ACOA pastors within a denominational context and then explores the effects of growing up with an alcoholic parent(s) by way of a two-part face-to-face semi-structured interview and eight inventories/scales. Discussion of the results, limitations of the project, future studies to consider, and recommendations follow.

Chapter 1

The Problem and Its Setting

An eight-year-old boy sits on his parent's bed, staring out the window on a Friday afternoon, anxiously waiting for his father to return home from work at the end of the day. The knot in his stomach grows larger as the minutes tick off with no sign of his dad's car. The routine was all too familiar to the child. It had been played out numerous times before. The boy would watch and hope, waiting for his father to finally pull in the parking lot across the street. He would study his father's gait from the upstairs' window, looking for any sign of a drunken stumble, any sign that his father had been with his buddies at the Stagecoach Inn. He would then run down the stairs and nervously wait for his dad's voice, listening for any sign of slurring. Finally, he would run up to his father to give him a hug and to get close enough to see if he smelled alcohol on his dad's breath. If he did, he knew what it meant. It would be a night of yelling, crying, and doors slamming, of fear and tension for the family, until his dad finally fell asleep in the living room chair, the smell of alcohol filling the room. It's 5:10 PM now and the boy prays fervently, hoping against hope, that this night would not be like other Friday nights.

A thirty-eight year old pastor sits in his office feeling trapped and cornered by the couple sitting across from him near the door. They're yelling at him, veins bulging on the sides of their heads, fire shooting from their eyes, furious at what they feel is pastoral incompetence. The pastor can't seem to stop the shaking inside or get rid of the knot in his stomach. The trembling muscles give away his fear. Volley after volley of explosive anger is lobbed at the pastor. He weakly tries to respond to their accusations but they're not interested in explanations or even apologies. They're out for blood, his blood, and

he can't stop them, no matter how hard he tries. They finally leave in a huff, vindicated in producing such a fearful response in the pastor, laughing at what they perceive to be his humiliation.

At first glance, the two examples above may not seem to have much in common but they do. They are true events from my life and the story of how being raised in a home where alcohol was abused has impacted my ability to minister. They are the story of how personal identity affects pastoral leadership.

To the outside observer, I have been a devoted, talented, caring, responsible and successful pastor for over twenty years. The church where I currently serve as pastor, having floundered for a number of years prior to our arrival, grew from 30 to 200 under our ministry and was recognized by our denomination as a revitalization success story several years ago. I have been sought out as a frequent speaker for conferences, workshops and training events. Twice, I have been elected by my peers to serve as a presbyter (overseer) for twenty churches within my denomination. In addition, I have served on numerous committees in our community and have received several awards, most notably, citizen of the year.

Although I have certainly desired to glorify the Lord with my life and ministry, what most individuals with whom I have worked and served are unaware of, however, is that there have been deeper, more unhealthy and unconscious factors at work as well (e.g. perfectionism, coupled with the fears of failure, conflict, punishment and rejection). I had some understanding that many of these underlying motivations stemmed from family of origin issues and even sought professional counsel early on in my ministry to address them. However, it has only been over the past seven to eight years, since the second

incident noted above, that I have begun to see the depth of their effect on my ability to exercise healthy pastoral leadership and intentionally started to explore the link between growing up in a home where alcohol was abused and its impact on the ministry. I do not believe that my experience is unique.

Estimates are that somewhere between twenty-eight and thirty-four million Americans are children of alcoholics.¹ This would translate into approximately ten to twelve percent of the children in the country having been raised, or being raised in households where an alcoholic adult is present.² If this statistic is valid across the spectrum of the population, including those in pastoral ministry, then between one in eight and one in ten pastors grew up with at least one alcoholic parent. Given the high number of adult children of alcoholics who have entered the helping professions of counseling, social work, nursing, psychiatry, pastoring, etc., it is possible, though, that the percentage might even be higher.³ How many of these pastors have been impacted, as I was, by growing up in a home where alcohol was abused? Furthermore, how many

1. Herbert L. Gravitz and Julie D. Bowden, *Recovery: A Guide for Adult Children of Alcoholics* (New York: Simon & Schuster, 1987), 2; Kenneth J. Sher, *Children of Alcoholics: A Critical Appraisal of Theory and Research* (Chicago: University of Chicago Press, 1991), 5; Jessica Skorupa and Albert A. Agresti, "Career Indecision in Adult Children of Alcoholics," *Journal of College Counseling* 1 (Spring 1998): 54.

2. Linda Veronie and David B. Frueshstorfer, "Gender, Birth Order and Family Role Identification Among Adult Children of Alcoholics," *Current Psychology* 20, no. 1 (Spring 2001): 53; Timmen L. Cermak, *A Primer on Adult Children of Alcoholics* (Deerfield Beach, FL: Health Communications, Inc., 1989), 9.

3. Sandra D. Wilson, *Counseling Adult Children of Alcoholics*, Volume 21 of *Resources for Christian Counseling*, ed. Gary R. Collins (Dallas, TX: Word Publishing, Inc., 1989), 81-82; Mel Howell, "Adult Children of Alcoholics as Missionaries," *Evangelical Missions Quarterly* 36, no. 1 (January 2000): 64; Sean Sammon, *Alcoholism's Children: ACOAs in Priesthood and Religious Life* (New York: Alba House, 1989), 50; Judith S. Seixas and Geraldine Youcha, *Children of Alcoholism: A Survivor's Manual* (New York: Harper & Row, 1985), 48; Kara Coombes and Ruth Anderson, "The Impact of Family of Origin on Social Workers From Alcoholic Families," *Clinical Social Work Journal* 28, no. 3 (Fall 2000): 281; Barbara L. Wood, *Children of Alcoholism: The Struggle for Self and Intimacy in Adult Life* (New York: New York University Press, 1987), 144-155.

congregations have been affected in some way by pastors whose identities were influenced by the alcoholic home?

In my case, one of the things I discovered was that when I failed to identify and address my own family of origin issues related to alcohol, then I unwittingly replicated the same patterns that I grew up with in the congregation where I serve. This ought not to be surprising, however, for as author Earnie Larsen notes in his book, *Old Patterns, New Truths: Beyond the Adult Child Syndrome*, “What we live with we learn; what we learn we practice; what we practice we become.”⁴ He goes on to add that “we automatically act out the rules and patterns learned over many years of practice – rules and patterns we constantly reinforced and then created situations to reinforce.”⁵ Respected leadership guru John Maxwell attests to this as well in his own inestimable way when he declares, “We teach what we know - we reproduce what we are.”⁶

My identity was affected by growing up in a home where alcohol was abused and it impacted, as well, my view of others, God and the ministry. Tragically, I reproduced the unhealthy patterns I had learned and experienced in childhood in my church family. Since churches function like extended families and the factors that lead to dysfunctional families are the same factors that can affect church health as well, it is not a surprise to realize, then, that in spite of the apparent outward success of growth in numbers at the church, I unintentionally had encouraged the church family to join me in my dysfunction and they unfortunately complied.⁷

4. Earnie Larsen, *Old Patterns, New Truths: Beyond the Adult Child Syndrome* (San Francisco: Harper & Row, 1988), 22.

5. Ibid.

6. John C. Maxwell, *The 21 Irrefutable Laws of Leadership: Follow Them and People Will Follow You* (Nashville, TN: Thomas Nelson Publishers, 1998), 138.

7. Victoria Rebeck, “Congregations Often Act Like Dysfunctional Families,” *Christian Ministry* 21, no. 1 (Jan-Feb 1990): 14-16.

Again, I do not believe that I am alone in this experience. I suspect that it is true in the lives of countless other pastors as well. Indeed, as Claudia Black, a pioneer in the field, powerfully contends, “The bottom line is: ALL CHILDREN RAISED IN ALCOHOLIC HOMES NEED TO BE ADDRESSED. ALL CHILDREN ARE AFFECTED” [emphasis original].⁸ Herbert L. Gravitz and Julie D. Bowden, founding board members of the National Association for Children of Alcoholics, confirm this notion when they assert that “there is no such thing as growing up unaffected when alcoholism is present in a family.”⁹ Noted author and evangelical Sandra Wilson echoes this from her research when she writes, “While acknowledging individual differences in adult children of alcoholics, researchers and writers in the area concur that, despite an appearance of survival, all children are affected by growing up in alcoholic families.”¹⁰

In what ways are individuals affected by growing up in alcoholic homes? What are some of the characteristics of adult children of alcoholics? We know from the literature that adult children of alcoholics share many traits in common. Janet Woititz, a pioneer in the field, in 1983, identified thirteen common characteristics that she observed in clinical work with groups of adult children of alcoholics.¹¹ Among these are guessing at what normal is, judging oneself without mercy, taking oneself very seriously, being super responsible or super irresponsible, constantly seeking approval and affirmation, and overreacting to changes over which one has no control.¹²

8. Claudia Black, *It Will Never Happen to Me!* (Denver, CO: MAC Publishing, 1982), 27.

9. Gravitz and Bowden, 4.

10. Sandra D. Wilson, “Evangelical Christian Adult Children of Alcoholics: A Preliminary Study,” *Journal of Psychology and Theology* 17, no. 3 (Fall 1989): 264.

11. Janet G. Woititz, *Adult Children of Alcoholics* (Deerfield Beach, FL: Health Communications, Inc., 1983), 4.

12. *Ibid.*, 24-47. For a full list of Woititz’ thirteen characteristics, see Appendix A (p. 169).

Thomas Perrin, a member of the original small group that worked under Woititz's mentoring, adds seven more to her list as a result of his workshop involvement with other adult children of alcoholics.¹³ Perrin's additional seven characteristics include locking oneself into a course of action without full consideration of other options/consequences, seeking tension and crisis but then complaining about it, avoiding conflict or aggravating it but rarely dealing with it, fearing rejection and abandonment but rejecting others, fearing failure but sabotaging one's success, fearing criticism and judgment but being critical and judgmental of others, and poor time management.¹⁴

Other clinicians and authors, building on Woititz's and Perrin's work, have added additional characteristics to those already mentioned. John Bradshaw, for example, noted speaker and writer on family issues and shame, utilizes the acronym ADULT CHILDREN OF ALCOHOLICS to supply a checklist of twenty-five common characteristics he has observed in his work with families of alcoholics.¹⁵

In the evangelical world, Wilson is certainly the standard bearer. In her extensive work, *Counseling Adult Children of Alcoholics*, Wilson organizes the many unhealthy characteristics most frequently experienced by adult children of alcoholics into four main categories: mental, emotional, physical and relational.¹⁶ She then provides a list of nine to ten characteristics for each main category; a list that she asserts is only representative and not exhaustive.¹⁷

13. Thomas W. Perrin, *I Am an Adult Who Grew Up in an Alcoholic Family* (New York: The Continuum Publishing Company 1991), 10.

14. Ibid., 38-49.

15. John Bradshaw, *Bradshaw On: the Family – a Revolutionary Way of Self-Discovery* (Pompano Beach, FL: Health Communications, Inc., 1998), 88-92.

16. Wilson, *Counseling Adult Children of Alcoholics*, 65-80.

17. Ibid., 65.

While the literature on adult children of alcoholics tends to highlight the negative or unhealthy characteristics of adults from alcoholic families, these individuals also possess many positive and healthy traits as well, a point that Wilson is quick to acknowledge.¹⁸ Indeed, some of what was at first detrimental may actually be able to be redeemed and turned into strengths as the individual experiences healing. In chapter two, this thought will be developed in greater detail. Suffice to say at this point, a number of adult children of alcoholics reflect a resiliency and/or growth that has allowed them not only to survive but also to triumph over their adverse circumstances.¹⁹

In light of this, my thesis is that there are common characteristics (*both positive and negative*) of adult children of alcoholics that impact pastoral leadership. Of the many characteristics/traits adult children of alcoholics share in common, I intend to focus on five that I have found most noticeable in my own ministry. The traits to be considered are conflict avoidance, people pleasing, perfectionism, sensitivity and empathy. While the biblical and theological underpinnings for these five traits will be discussed in greater depth in chapter two, a number of comments are in order at this stage as a means of introducing these particular characteristics.

Conflict avoidance is quite common among individuals who have been raised in homes where alcohol has been abused.²⁰ This trait is easy to understand. When a child is raised in the chaotic world of an alcoholic family, with fighting and yelling the norm,

18. Ibid., 65-66.

19. Coombes and Anderson, 282; Wilson, *Counseling Adult Children of Alcoholics*, 52; Wood, 144-145; Ronald G. Rickner and Siang-Yang Tan, "Psychopathology, Guilt, Perfectionism, and Family of Origin Functioning Among Protestant Clergy," *Journal of Psychology and Theology* 22, no. 1 (1994): 35-36.

20. Black, p. 35; Paul Curtin, *Hidden Riches: Stories of ACOAs on the Journey of Recovery* (New York: Continuum, 1991), 33; Perrin, 34,40; Jane Middleton-Moz and Lorie Dwinell, *After the Tears: Reclaiming the Personal Losses of Childhood* (Pompano Beach, FL: Health Communications, 1986), 9; Wilson, *Counseling Adult Children of Alcoholics*, 83.

with unexplainable outbursts of anger a regular part of life, and with the feeling of fear and a powerlessness to control the events around him or her, it is only natural for such a child as he or she grows older to attempt to avoid conflict in any form. The memories and, more importantly, the emotions are too vivid and too painful to allow to reawaken and be relived. Fear of punishment and loss of control are often at the root of this avoidance. It is far better, or so their thought goes, to pursue peace at any cost. Such becomes a rallying cry for many an adult child of an alcoholic. The danger of this approach in the pastorate is all too clear. Situations that should be addressed are not for fear of the possible angry repercussions. Manipulation is often employed as a means of protection by controlling people and situations indirectly in order to keep oneself from being in a place where one could come under attack. Keeping everyone happy becomes a full-time occupation and this leads into the second characteristic that will be investigated in this project: people pleasing.

That people pleasing is a common characteristic of children of alcoholics is made abundantly clear in the literature.²¹ Particularly susceptible are those individuals who take on the role known as “Placater” in the alcoholic home.²² According to Black, the placater is a sensitive child who “spends his time trying to please others, trying to make others feel better, and usually he succeeds in doing just that.”²³

21. Woititz, *Adult Children of Alcoholics*, 45; Sammon, 49; Perrin, 34; Gravitz and Bowden, 24; Bradshaw, *Bradshaw On: the Family*, 90; Daryl E. Quick, *The Healing Journey for Adult Children of Alcoholics* (Downers Grove, IL: InterVarsity Press, 1990), 159-160.

22. The idea of family roles that are taken on as means of stabilizing the alcoholic family was theorized by Claudia Black, and her student, Sharon Wegscheider-Cruse. Black describes three roles: Responsible One, Adjuster and Placater. Wegscheider-Cruse suggests four: Family Hero, Scapegoat, Lost Child and Mascot. In chapter three, these roles will be discussed in greater depth along with the research in support of and in opposition to the use of the construct.

23. Black, 24.

People pleasing is also usually associated with a broader condition known as codependency.²⁴ Melody Beattie, an author who has done extensive writing and training on the subject of codependency, defines a codependent person as “one who has let another person’s behavior affect him or her, and who is obsessed with controlling that person’s behavior.”²⁵ Sharon Wegscheider-Cruse, a pioneer in the adult children of alcoholics movement and noted author, adds to this idea by asserting, “Co-dependency is a specific condition that is characterized by preoccupation and extreme dependence (emotionally, socially, and sometimes physically), on a person or object. Eventually, this dependence on another person becomes a pathological condition that affects the co-dependent in all other relationships.”²⁶

One way this extreme dependence is manifested, according to Wegscheider-Cruse, is through people pleasing. She writes, “The people-pleaser moves cannily through life, always trying to figure out what others want. . . . [T]he people-pleaser develops sophisticated skills and becomes adept at manipulation and control.”²⁷ Usually at the heart of the condition is a fear, a fear of rejection and abandonment.

Unfortunately, the consequence is that people pleasers forever live their lives for others, neglecting their own needs and wants, trying to control and manipulate people into approving and affirming them but at the same time being controlled and manipulated by the very people from whom they are seeking approval. Tragically, they end up becoming like a marionette on strings, a puppet under the control of others.

24. The term “codependency” was first utilized in relation to family members of alcoholics whose lives had become unmanageable as a result of living with an alcoholic, although now it has taken on a wider meaning and is associated with other types of addictive families beyond the alcoholic.

25. Melody Beattie, *Codependent No More: How to Stop Controlling Others and Start Caring for Yourself* (New York: Harper San Francisco, 1992), 36.

26. Sharon Wegscheider-Cruse, *Choice Making for Co-Dependents, Adult Children and Spirituality Seekers* (Deerfield Beach, FL: Health Communications, Inc., 1985), 2.

27. *Ibid.*, 11.

As with conflict avoidance, the danger of being a people pleaser is all too clear. Pastors that live for the applause of the congregation, who, instead of feeding the flock, feed off the flock to meet their need for approval as a result of the impact of growing up in a home where alcohol was abused, will be at the mercy of the congregation and will find it difficult, if not impossible, to lead and to make the difficult decisions when they are necessary.

The third characteristic being investigated in this project is perfectionism, another trait often associated with growing up in a family where alcohol was abused.²⁸ Wilson makes this very clear when she writes, “The impossible and unrealistic goal of perfection is set during a person’s childhood in an alcoholic family.”²⁹

The trait of perfectionism is particularly associated with those who identify with the “Family Hero” role in the family. Black refers to family heroes as responsible children who “have learned to rely completely on themselves. It is what makes sense to them. They have learned the best way to achieve stability is to provide it for themselves.”³⁰

According to Geraldine Glover, in an article she wrote for *School Counselor*, “Heroes become perfectionists, relentlessly unkind to themselves and afraid to pay attention to their own good feelings. Feelings of self-worth come from external sources.”³¹ Wilson concurs, adding that heroes usually are first-born, provide structure and stability to the family, are high achievers and need perfection in life to gain

28. Woititz, *Adult Children of Alcoholics*, 81; Middleton-Moz and Dwinell, p. 9; Gravitz and Bowden, p. 64; John C. Friel and Linda D. Friel, *Adult Children: The Secrets of Dysfunctional Families* (Deerfield Beach, FL: Health Communications, Inc., 1988), 74-75.

29. Wilson, *Counseling Adult Children of Alcoholics*, 160.

30. Black, 20.

31. Geraldine J. Glover, “The Hero Child in the Alcoholic Home: Recommendations for Counselors,” *School Counselor* 41, no. 3 (January 1994): 3-5.

affirmation, believing they are okay only when doing something for someone or being good.³² Not surprisingly, a number of these family heroes are drawn to the pastoral ministry. As Sean Sammon points out, “Priesthood and religious life have often attracted heroes. These life choices emphasized perfection, control, self-discipline, and disregard of personal needs. Both provided members with a ready-made identity and the opportunity to take care of others. What fertile ground for the hero’s role to flourish!”³³ Wilson concurs when she notes, “Clergypersons are apt to be Responsible Ones/Heroes if they were raised in alcoholic families.”³⁴

Perfectionism, as we shall see in greater detail in chapter two, can prove very damaging to a pastor and to the congregation and is often rooted in a fear of failure, a fear of punishment, and the need to be in control. If unchecked and unaddressed, the pursuit of unhealthy perfection can lead to hypocrisy, legalism and a denial of reality and feelings in the congregation.

The final two characteristics to be investigated in this project are sensitivity and empathy. Although related, they are not identical. Sensitivity, as used in this project, deals with the ability to pick up on body language, non-verbal communication, and the feelings and emotions of others. In short, the ability to “read” another person or situation accurately is what we mean by sensitivity. As to empathy, here reference is made to the ability not only to “read” another person, but the ability to step into another person’s world, to put ourselves into someone else’s situation and feel as they feel. In other words, when we speak of empathy, with regard to this project, we are referring to the

32. Wilson, *Counseling Adult Children of Alcoholics*, 54.

33. Sammon, 50.

34. Wilson, *Counseling Adult Children of Alcoholics*, 82.

ability to identify with another person on more than just an intellectual level, to go deeper to an emotional level where one “feels in the gut” what another person is feeling.

Both traits are often associated with adult children of alcoholics. With regard to sensitivity, Gravitz and Bowden point out that those who assumed the placater role in the alcoholic family are astute at reading people:

What placaters fix are people’s feelings, worries, troubles. They learn to be so sensitive and perceptive to what is happening that they can walk into a room, and without even consciously realizing it, figure out just what the level of tension is, who is fighting with whom, and whether it is safe or dangerous. And reflexively they begin to diffuse whatever tension is in the room.³⁵

This heightened sense of sensitivity is developed early on in the life of a child raised in an alcoholic family. As Timmen Cermak, a founding member of the National Association for Children of Alcoholics and past president, reveals:

Hyperalertness is the normal human response to situations that generate a lot of anxiety, and alcoholic families are extremely powerful sources of anxiety for children. You grew up with people whose moods changed rapidly and without explanation. . . .With the rules constantly changing and the normal ebb and flow of family life destroyed by your parents’ drinking, you learned that the only way to keep safe was to become hyperalert to your surrounding world. The sooner you noticed that danger was brewing, the sooner you could get out of the house, start placating your parent, or hide under the bed.³⁶

Along with sensitivity, empathy is also generated early on in the life of a child raised in a home where alcohol was abused and is usually associated with the placater role as well. Black notes that a placater becomes “very skilled at listening and demonstrating empathy, and is well-liked for these attributes.”³⁷ Sammon confirms this, noting that placaters are “empathic listeners” who “divert attention from themselves.

35. Gravitz and Bowden, 24.

36. Timmen Cermak, *A Time To Heal: The Road to Recovery for Adult Children of Alcoholics*. (New York: St. Martin’s Press, 1988), 99-100.

37. Black, 24.

Their time is spent pleasing people, making them feel better.”³⁸ Therapist Barbara Wood points out that the family hero also has great potential for empathy, particularly those drawn to the helping professions when she writes, “They often bring to their work an extraordinary capacity for empathy.”³⁹

As I reflect upon my life and ministry over the past twenty years, as painful as it might be to admit, I see each one of these characteristics evidenced in some fashion or another. Although it may be easier to admit to the traits of sensitivity and empathy than to the perfectionism, people pleasing and conflict avoidance, they still flowed from the wrong motivation much of the time. They flowed from the need to be safe and affirmed. As we shall see in chapter two, however, those types of motivations are not the ones to which we have been called. Moreover, for pastors who are responsible to preach, teach and care for God’s flock week after week, the drive for perfection, the need to be in control and the need for the congregation’s affirmation, coupled with the fear of rejection, abandonment, failure and punishment are not only unhealthy but can become outright dangerous to the emotional, physical and spiritual health of both the pastor and the congregation. It remains to be seen, however, if my experience is typical of other pastors, if my thesis, that there are common characteristics (*both positive and negative*) of adult children of alcoholics that impact pastoral leadership, is applicable on a broader scale.

I intend to test my thesis within the context of my denomination, and more specifically, among the credentialed ministers in the New York District of the Assemblies of God. The two-phase project, described in detail in chapter four, will give me the

38. Sammon, 49.

39. Wood, 144.

opportunity to identify those pastors who grew up in a home where alcohol was abused and then to explore in greater depth through semi-structured interviews the impact, if any, such an upbringing had in relation to the five selected characteristics. When the project is completed, I anticipate I will discover that I am not unique. Although all five characteristics that I am exploring may not have caused equal impact in each participant (not every trait manifests in every person according to experts in the field and some of the traits sometimes manifest in opposite fashion – e.g. hyper-responsible or irresponsible), I fully expect to discover, as a whole, that other pastors have similar stories to mine and that there are common characteristics (both positive and negative) of adult children of alcoholics that impact the ministry.

Chapter 2

Theological Framework

Importance of Spiritual and Emotional Health

In his book, *The Emotionally Healthy Church*, Peter Scazzero contends that “the overall health of any church or ministry depends primarily on the emotional and spiritual health of its leadership.”⁴⁰ He goes on to add that “the key to successful spiritual leadership has much more to do with the leader’s internal life than with the leader’s expertise, gifts, or experience.”⁴¹

A review of the biblical record and/or a survey of church history affirms the veracity of Scazzero’s claims. Consider, for example, the Old Testament leaders Samson and Saul. Both men experienced supernatural anointing from God to carry out His work and will in behalf of Israel. Samson was empowered by God with great strength when the Spirit stirred him. Sadly, he who knew such physical strength never developed the corresponding spiritual and moral strength and squandered his anointing at the lap of Delilah.⁴² The lack of a healthy internal life tragically led to destruction in his public life.

In Saul’s case, he, too, was anointed by the Spirit of God with power at the launch of his ministry. This anointing initially changed Saul’s heart and life. Unfortunately, the change was not a permanent one as Saul failed to live out the Lord’s requirements of obedience. He chose people pleasing, pride, justification and excuses for his failures and rebellion. God rejected Saul and looked for a man after His own heart to replace him. Saul forfeited the anointing and began a rapid descent into oppression and depression,

40. Peter Scazzero with Warren Bird, *The Emotionally Healthy Church: A Strategy For Discipleship That Actually Changes Lives* (Grand Rapids, MI: Zondervan, 2003), 20.

41. Ibid.

42. Judges 13-16.

paranoia and ultimately death. A kingship that began in humility and with such promise ended in complete disaster.⁴³

Such disasters and failures, however, are not restricted to the Old Testament. Consider, for example, the accounts of Judas Iscariot or Diotrephes in the New Testament.⁴⁴ Judas was called by Jesus to follow him. He walked and lived with Jesus and, as far as we know, preached the gospel of the kingdom, cast out devils and healed the sick with the authority and anointing of Jesus like the other disciples. Tragically, the anointing was not matched with godly character and the discrepancy between his internal life and his public ministry ultimately resulted in an open door for Satan to fill him, leading to his betrayal of Jesus. Diotrephes, a leader in one of the churches in Asia Minor, is described by the apostle John in his third epistle as a controlling and self-absorbed leader.

When we turn to church history, we discover a road strewn with casualties of war who brought reproach to the kingdom of God through their public failures because they declined to address character flaws hidden beneath the surface. Time and space do not permit an extensive survey but a brief review, however, of the failures of the past twenty-five years reveals the familiar names in evangelical circles of Frank Tillapaugh, Gordon McDonald, Jimmy Swaggart, Jim Bakker, and Ted Haggard. Starting from humble beginnings, each experienced a powerful anointing of God's Spirit and watched their ministries grow to national and/or international proportions. Tragically, at the height of their ministries, all were exposed as living double lives. Their fall produced pain in the body of Christ and ridicule from the world. While they all pursued a path of restoration

43. 1 Samuel 9-31.

44. Matthew 10:1-10; John 12:1-6; 13:21-30; Luke 22:1-6; and Matthew 27:1-5 describe the rise and fall of Judas Iscariot. 3 John 9-10 mentions the difficulty the apostle John had with Diotrephes.

following their public failure, each serves as a testimony to Scazzero's assertion that successful spiritual leadership has more to do with the leader's inner life than the outer public ministry. They also serve as a warning to us that when we fail to deal honestly and forthrightly with underlying issues, they will usually be exposed in a very public manner.

Scazzero's contention that both the spiritual and emotional health of the leader is paramount to the health of any ministry provides the backdrop for exploring the theological and biblical framework for my thesis. When pastors function out of a fundamental brokenness that is rooted in family of origin issues related to alcohol and when this brokenness is neither confessed nor addressed, they, and the congregations they serve, will be harmed at some point.

Michael Cavanagh, in his book, *The Effective Minister: Psychological and Social Considerations*, drives home this point when he writes, "Ministers who are oblivious to their weaknesses will make the same mistakes over and over again, damaging themselves and others in the process."⁴⁵ It is only a matter of time before the damage is apparent, for when the heart is unhealthy, so is the ministry that flows from it.

This should not be too surprising, however, for as Solomon noted in Proverbs 4:23, "Above all else, guard your heart, for it is the wellspring of life."⁴⁶ Jesus confirmed this thought in Matthew 12:34, "Out of the overflow of the heart, the mouth speaks."

It is here, however, where the problem lies, for the heart has been wounded in those raised in homes where alcohol has been abused, leading to the development of unhealthy defense mechanisms which, in turn, affect the pastor's ability to minister

45. Michael E. Cavanagh, *The Effective Minister: Psychological and Social Considerations* (San Francisco: Harper & Row, 1986), 4.

46. All Scriptures, unless otherwise noted, are from the New International Version of the Bible.

effectively. Unless recognized and addressed, these hurts and defense mechanisms are unconsciously carried into adulthood and into the ministry. They can lead to a distortion in our understanding of Scripture with regard to the nature of God, the Christian life and ministry. They can also lead to the development of a motivation for ministry that is neither biblical nor healthy. Finally, they can result in a church being conformed to an image of the pastor's family of origin instead of the image of Christ.

It is in these three areas (the distortion of Scripture, the motivation for ministry, and the definition of the church as God's family) where we are compelled to investigate the biblical and theological framework for healthy ministry and to challenge on Scriptural grounds the danger of operating out of unaddressed brokenness rooted in family of origin issues related to alcohol.

Distortion of Scripture

One of the risks for those who have been raised in homes where alcohol has been abused is the development of a lens, often unconscious, that acts as a filter for life, relationships, reactions and beliefs. It is akin to a person wearing sunglasses. Everything is colored by the lens.

So, also, for those who have been raised where alcohol has been abused, everything can be colored by the dysfunction, even the interpretation of Scripture. This is certainly not to imply that valid study, interpretation and application are impossible for such individuals. They are possible and many pastors who have been raised with brokenness are capable of great exegesis and hermeneutics.

Nonetheless, there are areas where the wounds of the past may and do color the interpretation and application of the Scripture in the present, particularly in those areas

most touched and affected by the wounding. The filter causes individuals to interpret the Scripture in light of their painful experience rather than interpret their experience in light of the Scripture, even though they may not consciously be aware of the filter. This is quite evident with regard to the five characteristics under consideration in this thesis: conflict avoidance, people pleasing, perfectionism, sensitivity and empathy.

That we are to be peacemakers is made abundantly clear in the Scriptures. For example, we are called to “make every effort to live in peace with all men” (Hebrews 12:14), to “let the peace of Christ rule” in our hearts since as members of one body we “were called to peace” (Colossians 3:15) and to “make every effort to keep the unity of the Spirit through the bond of peace” (Ephesians 4:3). In addition, we are commanded to bear with one another (Ephesians 4:2; Colossians 3:13), to “live at peace with everyone” as much as it depends on us (Romans 12:18) and to avoid quarreling (2 Timothy 2:14, 24). People that are peacemakers are blessed and will be called God’s children (Matthew 5:9) and will raise a harvest of righteousness (James 3:18).

The distortion of these Scriptures comes when we pursue peace for the wrong reasons or when we really are pursuing a truce instead of peace while all the while believing and claiming that we are just trying to be peacemakers according to the Bible. Peacemaking, however, is far different than truce making!

Sadly, for those who have been touched by an alcoholic family, truces were all we could hope for in dealing with the conflict. Real peace was impossible. We know what it was like to live with conflict since it was often prevalent on an almost continual basis. The chaos and disorder that ensue when a parent drinks leads to regular unease and unrest. In response to this conflict, different family members usually develop different

copied mechanisms to survive: deflection by humor, manipulation by trying to keep the parent happy, avoidance and withdrawal, rebellion, or perfection and achievement just to name a few.

Unfortunately, none of these approaches actually deals with the problem. Deflection redirects the conflict but doesn't address it. Manipulation by keeping the parent happy defuses the conflict temporarily but doesn't lead to true peace either. Avoidance and withdrawal keep the child out of harm's way but accomplish little long-term. Rebellion by the scapegoat diverts attention from the conflict to the scapegoat but at the cost of alienation from the family. Perfection and achievement numb the conflict by making people feel good but it fails to address the issues. All of these attempted fixes are, at best, simply attempts to make a truce, to keep the battle from getting out of control.

The danger is that as pastors we tend to resort to the same methods in dealing with church conflict that we learned when growing up. They become our default methods for dealing with conflict and, not surprisingly, we get the same results we did as children. We get truces at best.

In my case, I had different default mechanisms depending upon whether the angry conflict was between other people or it concerned me. In the former case, I tried to mediate and help couples/individuals to get along. In the latter case, I would manipulate, perform, please, deflect, or do whatever I had to do to avoid being in the place where anger was directed against me. On a broader church level, I found myself attempting to keep everyone happy at the church so that no one would be angry with me. I was pursuing a truce and replicating what I knew growing up. As a result, I preached grace,

peacemaking, love, and bearing with one another as an unconscious excuse to avoid dealing with thorny issues that might erupt in anger.

Unfortunately, trying to keep people happy instead of guiding them to be holy is a dead end as I discovered. All of the issues I refused to address and tried to avoid in my attempts to hold off conflict backfired. In actuality, they became worse when they did erupt since they had been “underground” for so long.

To balance out the distortion in this area, we need to be reminded that grace is good. Peacemaking is biblical. Both, however, must be balanced with truth. Pastors are called to encourage. They are also called to exhort and challenge. People are called to bear with each other. They are also called to speak the truth in love to one another. The church is to be a safe place for the healing of broken people. It must also be a place that addresses wolves, false teachers and divisive people. It preaches redemption. It must also preach about sin. Both are part and parcel in the gospel.

People pleasing is a second characteristic that is easy to misinterpret and distort when wearing a filter. The Scripture calls us to denial and self-sacrifice (Mark 8:34), to servant leadership (Luke 22:25-26), to honor others above ourselves (Romans 12:10), to consider others better than ourselves (Philippians 2:3) and to “not become weary in doing good” (Galatians 6:9). To top it off, Paul tells us in I Corinthians 10:32 that he tried to “please everybody in every way” and that we are to follow his example as he followed the example of Christ (1 Corinthians 11:1).

For a codependent individual, these Scriptures are like music to the ears (or perhaps more accurately, like a drug to an addict!) and a justification for an inability to set healthy boundaries, to say “no” or to think of one’s own needs. Indeed, in keeping

with these Scriptures, we justify our self-sacrifice, even to the expense of our own families, for the cause of Christ.

Sadly, it is not for Christ that we are sacrificing but for our need to be accepted and affirmed. We please people because we need people. We need them to affirm us, to accept us and to make us feel safe. We are afraid of being rejected because our worth would be affected or so we believe. So we say “yes” when we want to say “no” to people. We give when we should really rest. We please and enable when we should challenge and empower. Our distortion of Scripture due to our filter keeps us giving and giving and feeling guilty or selfish when we say “no” to people. We find ourselves easily manipulated by others and resentful as a result. We then beat ourselves up for not being a servant and for being selfish.

Unfortunately, such distortion leads people to fall into the “Messiah Trap,” a trap so forcefully described by Carmen Berry and Mark Taylor in their book, *Loving Your Neighbor: A Recovery Guide for Christians Escaping Burnout and Codependency*.⁴⁷ In their book, they argue that the “Messiah Trap” is rooted in a distorted view of God – that he is absent or abusive - and is built on two lies: “(1) ‘If I don’t do it, it won’t get done’; and (2) ‘Everyone else’s needs take priority over mine.’”⁴⁸ Both lies will destroy us and lead us to burnout or a forced exit.

When we review the Scripture, however, we find a biblical balance that counteracts the distortion. Paul did affirm his desire to please people but this was in the

47. Carmen Renee Berry and Mark Lloyd Taylor, *Loving Yourself as Your Neighbor: A Recovery Guide for Christians Escaping Burnout and Codependency* (San Francisco: Harper & Row, 1990).

48. *Ibid.*, 5, 14.

context of voluntarily laying aside his rights in order to reach people for the gospel. On other occasions, he was unmovable and refused to please people.

For example, in Galatians 1:10, he asks the question, “Am I now trying to win the approval of men, or of God? Or am I still trying to please men? If I were still trying to please men, I would not be a servant of Christ.” He, no doubt, took to heart the admonition of Solomon in Proverbs 29:25, “Fear of man will prove to be a snare, but whoever trusts in the Lord is kept safe.” Later on in Galatians 2:5, he strongly asserts, “We did not give in to them for a moment so that the truth of the gospel might remain with you.” Paul the “people-pleaser” was also Paul the “immovable object” when the situation warranted it. He was not afraid of people nor did he feel obligated to please them when truth or principle were at stake. Saying “no” is not always sinful or selfish. Sometimes, it is a necessity.

Also, while giving to others is a commendable task, it loses its value when it is for the sake of selfish gain or distorted purposes. Such giving will only harm the flock, breed resentment in us and our families and lead to burnout over the long haul. We need instead to hear Jesus calling us, “Come to me, all you who are weary and burdened, and I will give you rest. Take my yoke upon you and learn from me, for I am gentle and humble in heart and you will find rest for your souls. For my yoke is easy and my burden is light” (Matthew 11:28-30).

When we look at Jesus with regard to ministry, what do we learn? We see Jesus moving among the crowds in ministry and then taking some time to be alone with his Father in prayer (Luke 5:16). He walked in peace because he did only what the Father wanted. When the crowds wanted to take him by force to make him a king after he had

miraculously fed them, he dismissed them and withdrew (John 6:15). When ministry opportunities grew, he moved on to another city instead (Mark 1:35-39). He could wait when he needed to wait, as he did with the death of Lazarus (John 11:5-6). He could also drop everything when necessary to speak to a woman who touched his garment and was healed (Luke 8:43-48), while still being on time to raise Jairus' daughter from the dead (Luke 8:49-56). He commended Mary and gently rebuked Martha because Mary took time to sit at his feet while Martha was fretting about everything (Luke 10:38-42).

Finally, at the end of his life, he thanked his Father that he had finished the work he had been given to do (John 17:4). What is remarkable is that there was so much more need around him. There were certainly more lepers to cleanse, more blind, deaf, lame and maimed people to heal, and more demons to cast out but he had finished what he was supposed to do. He followed the voice of his Father and this allowed him to be available to the needs around him without being trapped by an unhealthy distortion of pleasing people.

When we understand that loving others as we love ourselves requires a measure of healthy self-love and self-care and when we come to realize that there already is a Messiah and that Messiah is not us, and when we truly come to appreciate Jesus' words in John 15:5, "Apart from me, you can do nothing," then we can finally give ourselves permission to join the human race. We can learn to set healthy boundaries, to have time at Jesus' feet and to be channels through whom his Spirit can flow to touch people. In short, we can learn "to be" rather than just "to do."

Much of what is written above applies, as well, to the area of perfectionism, our third characteristic. The drive to achieve and to pursue excellence can be a healthy desire

if it is for the right reason. Unfortunately, for those who have been raised in homes where alcohol was abused, the reasons are not usually healthy ones. For family heroes, the need to achieve and the drive for perfection provides a ready-made identity for the family and gains perks and praise for the child. A fear of failure keeps the engine running at top speeds as the hero learns to be a “human doing” instead of a “human being.” When he or she becomes a Christian, the direction changes but the drive usually does not. We just add new standards to reach, new rules to follow, and new goals for which to strive.

This can easily lead to a distortion of Scripture. For instance, Matthew 5:48 becomes a theme verse to memorize and follow, “Be perfect, therefore, as your heavenly Father is perfect.” It could not be more plain for the perfectionist as he or she strives to “fight the good fight of faith” (1 Timothy 6:12), “press on toward the goal to win the prize” (Philippians 3:14), and “run in such a way as to get the prize” (1 Corinthians 9:24). What could be more clear? More prayer, more fasting, more good works, more, more, more! In fact, the motto of the perfectionist could be “never enough.”

Sadly, many perfectionistic heroes have never come face to face with grace. They gained a sense of identity by their performance as children and they have just translated the standards to their Heavenly Father as adults. Somehow, the belief still remains under the surface, “I am what I do and if I’m not perfect, I won’t be acceptable.” Such individuals lead a roller-coaster type life, satisfied (albeit temporarily) when the standard is met and discouraged when it is not. Worth is based on externals rather than on God’s unchanging love.

It's tragic enough that many pastors are trapped on this roller-coaster. It's even worse when they invite their congregations to join them and bring them into a legalistic bondage that does not and cannot reflect the freedom that is ours in Christ. Simply telling perfectionists to lower their standards, however, will not solve the problem. The solution lies in addressing the reasons for the standards in the first place by tearing down the strongholds and lies that keep them in place and experiencing an infusion of grace on a transformational level. We will explore this area of perfectionism again in chapter three's literature review.

With regard to empathy and sensitivity, our final characteristics, we, too, find a biblical basis for their function but the evidence in Scripture appears in a more indirect way than it does for peacemaking, people pleasing or perfection. In Hebrews 4:15, for example, we are reminded that we have a high priest in Jesus who has been tempted in every way as we have and as a result he is able to sympathize with our weaknesses (or as the King James Version reads, is "touched with the feelings of our infirmities"). Jesus did not save from afar. "The Word became flesh and made his dwelling among us" (John 1:14). He shared in our humanity (Hebrews 2:14) and "had to be made like his brothers in every way, in order that he might become a merciful and faithful high priest in service to God" (Hebrews 2:17).

Jesus touched lives because he touched people where they were, whether a woman at the well or a religious leader in the middle of the night, whether a leper who had been ostracized or a demon possessed man who was tormented. Jesus entered into people's lives, feeling their hurts, sharing their joys, and experiencing life with them.

It is this connection, this touching us where we are, that is the essence of empathy. As pastors, we cannot pastor from afar. Henri Nouwen, in his classic work, *The Wounded Healer: Ministry in Contemporary Society*, makes this point crystal clear when he writes that “no one can help anyone without becoming involved, without entering with his whole person into the painful situation, without taking the risk of becoming hurt, wounded or even destroyed in the process.”⁴⁹ We are called to enter into the lives of those we serve. In a different context, but with the same meaning, Paul states in Romans 12:15, that we are called to “rejoice with those who rejoice; mourn with those who mourn.”

Barnabas seems to be a man who had developed a deep capacity for empathy, to connect with those whom others had rejected. He vouched for Paul when the church in Jerusalem did not trust him (Acts 9:27). He blessed and led the fledgling work at Antioch when the church was first established and saw it grow strong in the Lord and in numbers (Acts 11:22-24). He supported John Mark and was willing to give him another chance when Paul was ready to discard him even though it led to the breakup of the missionary team (Acts 15:36-41).

Such empathy requires us to be sensitive to those whom we serve, to be observant of what is going on both on and under the surface. This requires being able to draw out the deep purposes of a person’s heart (Proverbs 20:5) which often requires being able to read nonverbal cues.

For those raised in a home where alcohol was abused, empathy and sensitivity are often found in high supply due to the painful and chaotic situations that abounded in the

49. Henri J.M. Nouwen, *The Wounded Healer: Ministry In Contemporary Society* (Garden City, NY: Doubleday, 1972), 72.

home. A high proportion of nurses, pastors, counselors, social workers and other helping professions came out of such homes and they bring a remarkable capacity for empathy and sensitivity.⁵⁰ Such individuals have the capacity to reach into areas, touch lives and persevere long after others have given up caring.

The risk to pastors in these two areas, then, is not so much one of a distortion of doctrine but a distortion of motivation and practice. Caring for others, entering their world and being sensitive to others' needs is a commendable work when done with the proper motivation. Although we will address the idea of motivation below in much greater depth, it is important at this juncture to point out that many times the caring and connection is for our benefit and not primarily for the other person. In other words, if we are honest with ourselves, our "fixing" them brings us a sense of worth. It's as if we are still trying to fix our family of origin. We have just changed location. Such use of empathy and sensitivity, rather than being a blessing to others, becomes a means of manipulating people, however unconsciously, to rescue them so that we feel good about ourselves. It's actually selfishness disguised as selflessness.

The other risk has to do with practice. Sometimes, our painful past experiences bleed through our empathy and sensitivity so that we are reading into the situation from our past rather than reading out of the situation what really is. Other times, the failure rests simply with our inability to listen. Proverbs 18:13 warns us about this when it states, "He who answers before listening - this is his folly and his shame." When we are doing all the talking, we usually miss the cues and we fail to discern what is really going

50. Kara Coombes and Ruth Anderson, "The Impact of Family of Origin on Social Workers From Alcoholic Families," *Clinical Social Work Journal* 28, no. 3 (Fall 2000): 281-282; Barbara L. Wood, *Children of Alcoholism: The Struggle for Self and Intimacy in Adult Life* (New York: New York University Press, 1987), 144.

on. Perrin warns about this, as well when he writes, “What I did was to learn from clues, small pieces of information randomly acquired and systematically sorted in my mind. I drew conclusions from small bits of information. . . . I learned to read minds. I became very intuitive. . . . The problem was that I was not right all the time.”⁵¹

Being aware of our motives in practicing empathy and sensitivity is essential if we are to use these tools effectively and in a healthy fashion. So, also, is the need to allow the Holy Spirit to minister through us to those whom we serve. In this way, we can feel their hurts but we can carry them to Christ instead of trying to fix them ourselves. Our empathy connects us. It’s God’s life that heals them.

With each of the five characteristics we examined, there is a distortion and/or misapplication of Scripture or there is an unhealthy motivation at work that distorts God’s intention for a pastor in ministry. The solution is not to reject the characteristics outright but to return to God’s original and biblical intention in giving them. Such a return is only truly possible for the pastor who is willing to allow God to begin the healing process.

By pursuing God’s healing, the pastor can discover a balanced approach and interpretation of Scripture with regard to dealing with conflict, caring and ministering to people, perfectionism, empathy and sensitivity. The brokenness can give way to wholeness and the wounds can be redeemed in a way that growing up in a home where alcohol was abused can turn out to be a gift that God permitted to prepare the pastor for more effective and fruitful ministry.

51. Thomas W. Perrin, *I Am an Adult Who Grew Up in an Alcoholic Family* (New York: The Continuum Publishing Company 1991), 15-16.

By way of the painful experience and God's healing, the pastor is able to grow to a place where he or she is able to be a godly peacemaker. Their gift of mediation, produced through painful experiences as children, will be able to be activated for godly purposes. Instead of making truces, they can begin making genuine peace. In fact, as healthy peacemakers, they will be able and willing to disrupt false peace in order to produce real peace. They will "truth it in love" in order to see people know lasting wholeness and peace.

Another gift given to the pastor through the experience will be the ability to be a caring and empathetic servant leader with healthy boundaries. Such a leader is free to say "yes" or "no" depending upon what the situation requires without guilt on the one hand or selfishness on the other. People will be drawn to such a pastor because of his or her ability to go the extra mile and to enter into the person's world and empower them rather than enable them.

Indeed, as Cavanagh points out, "If the minister is psychologically healthy, then he or she is more apt to be pastorally effective."⁵² Such pastors will see their ability to "read" others and situations as a useful tool of the Holy Spirit, not to protect themselves or to affirm themselves but to discern what is going on in the Spirit so as to minister appropriately and effectively.

Finally, pastors who have experienced God's healing will be able to pursue excellence for the right reason. It will not be to achieve perfection in order to be safe or to avoid the fear of failure or the fear of punishment, but for God's glory and the good of his church. For the first time, they will be able to obey not only the first half of Colossians

52. Cavanagh, 17.

3:23, “Whatever you do, work at it with all our heart” but the second half as well, “working for the Lord, not for men.” They will also have learned to view themselves more realistically with “sober judgment” (Romans 12:3). They will be able to fail and their identity won’t suffer for it and they will become more approachable to the congregation as a result.

Indeed, as Dan Allendar points out in his book, *Leading with a Limp*, “To the degree you face and name and deal with your failures as a leader, to that same extent you will create an environment conducive to growth and retaining productive and committed colleagues.”⁵³ These five characteristics, then, can be redeemed and used by the Lord to bring us to a new depth of ministry beyond what we have seen when we operated out of our brokenness.

Motivation for Ministry

When we are operating in the pain of the past instead of God’s grace and truth in the present, we stymie our ability to serve properly the flock to which we have been entrusted and fail to operate with the proper motivation. According to the Scripture, our ministry as pastors to serve God’s flock must flow out of a desire to glorify God with our lives. It must also be birthed and prompted by love for Him and others as well as be rooted in truth. This type of ministry, the Bible makes clear, is only possible through the power of the Holy Spirit.

The first aspect of a healthy motivation for ministry, that we are called to glorify God with our lives, is made abundantly clear in Scripture. In Romans 11:36, at the conclusion of a powerful doxology praising God’s wisdom and mercy, Paul asserts that

53. Dan Allendar, *Leading with a Limp* (Colorado Springs, CO: Waterbrook Press, 2006), 2.

“from him and through him and to him are all things. To him be the glory forever!”

Paul, in the final verse of this same epistle (Romans 16:27), declares, “[T]o the only wise God be glory forever through Jesus Christ!” He reminds the Corinthian believers that they had been bought with a price and that they were to honor or glorify God with their bodies (1 Corinthians 6:19-20). Later on in this same epistle, Paul challenges the church in whatever they do, to do it for the glory of God (1 Corinthians 10:31). In Revelation 4:11, the elders in heaven declare that God is worthy “to receive glory and honor and power.” Repeatedly in the epistles, we are reminded that God is to receive the glory (e.g. 2 Corinthians 1:20; 4:15; Philippians 1:11; 4:20; 1 Timothy 1:17; 2 Timothy 4:18; 1 Peter 4:11; and 2 Peter 3:18).

In the Old Testament, David commands us to “glorify the Lord” in Psalm 34:3. In Isaiah 42:8, the Lord reminds us that He “will not give his glory to another.” The psalmist in Psalm 115:1 echoes this theme by declaring, “Not to us, O Lord, not to us but to your name be the glory, because of your love and faithfulness.” Even the heavens are invited to participate in this declaration of God’s glory as Psalm 19:1 points out, “The heavens declare the glory of God; the skies proclaim the work of his hands.”

The church has understood this command to glorify God as the primary purpose of humanity and made it part of its confession of faith, as noted in the *Westminster Shorter Catechism*. In response to the first question, “What is the chief end of man?” it is stated “Man’s chief end is to glorify God and to enjoy Him forever.”⁵⁴

All our actions, then, in ministry and in life, are to be directed towards God’s glory. God’s desire, though, as the Scripture reveals, is for our pursuit of His glory to be

54. *The Confession of Faith: The Larger and Shorter Catechisms* (Glasgow: Free Presbyterian Publications, 1973), 287.

birthed in and prompted by love. This second aspect of a healthy motivation is affirmed by Jesus in Mark 12:30-31. In this passage, he responds to a question inquiring as to the most important commandment found in the law. His answer to the teacher to “love the Lord your God with all your heart and with all your soul and with all your mind and with all your strength” and to “love your neighbor as yourself” makes clear that love for God and love for others is to be the foundation of all of our dealings with God and with others.

Paul echoes Jesus’ teaching when he states in Romans 13:8-10 that the one who loves “has fulfilled the law” and that all of the commandments are “summed up in this one rule: ‘Love your neighbor as yourself.’ Love does no harm to its neighbor. Therefore love is the fulfillment of the law.” He goes even further in his first epistle to the church at Corinth by unequivocally pointing out the supremacy and priority of love. Without love, Paul makes clear, we gain nothing and we are nothing (1 Corinthians 13:1-3, 13).

Such love from us, of course, is only possible because God first loved us, as the Scripture makes absolutely clear in 1 John 4:19, “We love because he first loved us.” Indeed, as Paul affirms in Romans 5:8, “God demonstrates his own love for us in this: while we were still sinners, Christ died for us.” It is this love and mercy that we have freely received from God that prompts our response to offer our lives to him as a living sacrifice as Paul notes in Romans 12:1, “Therefore, I urge you, brothers, in view of God’s mercy, to offer your bodies as living sacrifices, holy and pleasing to God -- this is your spiritual act of worship.”

Following along this same theme, it is also this amazing grace that spurs on the sanctification process in us as Paul points out in Titus 2:11-12, “For the grace of God that

brings salvation has appeared to all men. It teaches us to say ‘No’ to ungodliness and worldly passions, and to live self-controlled, upright and godly lives in this present age.”

It is also this love that we are called to share with one another. Jesus makes this point to his disciples in the upper room discourse prior to his death when he intensifies the command to love one’s neighbor to include now a new command to love one another as he had loved them. Such love would be the hallmark of their new life together as his disciples and would be a testimony to the world of such (John 13:34-35).

Christ’s love as the model for our love is also at the heart of Paul’s command in Ephesians 5:1-2. He tells the church, “Be imitators of God, therefore, as dearly loved children and live a life of love, just as Christ loved us and gave himself up for us as a fragrant offering and sacrifice to God.”

This love for God and others that flows from God through us and allows us to glorify Him must be rooted in truth, the third aspect of a healthy motivation in ministry. Love is not just a subjective feeling that is rooted in our emotions but is a reality rooted in the truth.

In John’s prologue to his gospel, he makes it clear that it was not just grace that came with the coming of Jesus but grace and truth. In John 1:14, we read about the Word who became flesh and who came from the Father, as one who was “full of grace and truth.” In John 1:17, we discover that the law was given by Moses but “grace and truth came through Jesus Christ.” Indeed, as Jesus affirmed to Thomas in John 14:6, “I am the way, the truth and the life.” Jesus told the Samaritan woman in John 4:24 that “God is spirit, and his worshipers must worship in spirit and in truth.” He later tells the crowd in John 8:32, “Then you will know the truth, and the truth will set you free.”

God's objective truth, which is the basis for our proclamation, must also be reflected in the way we conduct our lives so that not only do we believe and preach truth, we also live and minister in truth and sincerity. Paul tells the Romans in 12:9, "Love must be sincere." He reminds the body of Christ in Ephesians 4:15 that the church must "speak the truth in love" if it is to grow up in Christ. He also commands the same church in Ephesians 4:25 to "put off falsehood and speak truthfully to his neighbor, for we are all members of one body." As if that were not enough to drive home the importance of truth, King David reminds us in Psalm 51:6 that God desires "truth in the inner parts." We, then, who have accepted truth are called to reflect truth by ministering authentically and transparently rather than behind masks or by way of illusions.

To sum, then, for God's glory, prompted by a love that is rooted in truth, we are called, through the power of the Holy Spirit, to serve the Lord and His flock. This basis provides us with a healthy and biblical motivation for ministry.⁵⁵

For those who were raised in homes where alcohol was abused, however, this sound and Scriptural motivation is absent or, more accurately, is merged with other unhealthy underlying motivations to form an unscriptural hybrid. If left unchecked and unaddressed, it will surely bring harm to the pastor and the congregation.

As mentioned previously in chapter one, many of the unhealthy and unconscious factors at work have to do with fears that developed as a result of the chaotic environment experienced by those who were raised in homes where alcohol was abused. There are often fears of failure, rejection, abandonment, punishment and loss of control. These fears can lead to a drive to control people and situations and/or to practice manipulation,

55. It is readily acknowledged that other aspects could be considered but the three aspects of a healthy motivation provided here are those considered germane to our topic.

withdrawal, perfectionism, people pleasing, obsessive behaviors/addictions and a host of other unhealthy ways of dealing with our past.

When we operate like this in ministry, however, we are operating contrary to all three aspects of the biblical and healthy motivation mentioned above. When our goal is protection, whether it be protection from loss, punishment, abandonment, failure, etc. then ministry has become about us rather than about God. Everything is seen through the lens of how we can be safe. In effect, we make ourselves, or at least our safety, an idol that we worship. What is tragic is that, most of the time, we who were raised in homes where alcohol was abused are not even aware this motivation is at work. It's instinctive and unconscious but it guides our decisions nonetheless. It's why we crave and need the accolades and affirmation of the congregation. Our identity is wrapped up in the ministry and our safety and worth is dependent upon our success. When we live like this, however, it is we who are craving and stealing the glory instead of giving glory to God alone.

We also violate the law of love when we operate out of unhealthy motivations. Biblical love, as revealed by God in John 3:16, is more than a feeling that we feel. It is active ("For God so loved that he gave"), sacrificial ("his one and only Son"), inclusive and unconditional ("that whoever believes in him"), redemptive ("should not perish") and eternal ("but have eternal life"). Love is a verb someone once said. It is something we do. Paul elaborates on the active nature of love in I Corinthians 13:4-8 when he tells us, "Love is patient, love is kind. It does not envy, it does not boast, it is not proud. It is not rude, it is not self-seeking, it is not easily angered, it keeps no record of wrongs. Love does not delight in evil but rejoices with the truth. It always protects, always trusts,

always hopes, always perseveres. Love never fails.” In short, biblical love acts and, when it acts, it acts in the highest interest of the one loved.

When we live out of our brokenness as a result of family of origin issues related to alcohol, though, we can’t love like this. Failing to comprehend the amazing love and mercy of God, since we never saw it evidenced in our families of origin, we can’t give anything away because we believe we need to keep what we have for fear that we will lose what little we have. Ministry, then, doesn’t flow out of love but out of need, our need. We may give an appearance of sacrificial giving when we try to please people and when we go beyond our own limitations because of our inability to say “no” to people, but the purpose of our giving is selfish. We give to get so that we are affirmed and safe. It is not done in the highest interest of the one loved but ultimately in our highest interest. It is not about the flock, it’s about us.

In actuality, instead of feeding the flock, we are feeding off the flock to gain a sense of security and well-being that is missing or has been so damaged by negative childhood experiences. Such a practice, however, is strongly warned against in Ezekiel 34 where God rebukes the shepherds (i.e. leaders such as kings, priests and prophets) who fleeced the flock to enhance their own security and wealth.

Finally, when we operate out of unhealthy motivations, we are also living contrary to the truth. In effect, we are living a lie. Much emotional energy is expended to keep up an image when we have been impacted negatively by growing up in a home where alcohol was abused. Our focus is on appearance management, rooted in our need to appear perfect to ourselves and, more importantly, to our congregations. We have to be in control. We have to have the answer. We strive to model a successful Christian life

to the congregation, not to mention a successful marriage and family. We also strive to model a successful church to the community. We can't expose our flaws, can't let down our guard, cannot remove the mask for fear that we will lose or be harmed in some way.

Sadly, we create an image for the congregation of what we want them to think we are (i.e. perfect). We have another image of who we think we are (i.e. a failure). Then, there is the real us, the person God knows us to be (a mixture of both strengths and weaknesses). It can become confusing and exhausting to live like this day after day.

Furthermore, when we operate out of image management, we, of necessity, must keep people at a distance. Intimacy is impossible for people obsessed with image because if people get too close they may see the "chinks in our armor" and we would not be able to hide. The sad and tragic result is that we shut out relationships, the very relationships God desires to use to bring about our healing. For some, the cost of this appearance management and the lack of intimacy are too great and they try to escape, often through an immoral affair. Others may unconsciously sabotage their ministry in order to be caught so as to be able to leave behind the pressures of ministry.

While these casualties are certainly tragic, Jesus has another name for the double-life that goes on prior to the fall. He calls it hypocrisy. It's what angered Him when He confronted the religious leaders of His day. He referred to them as hypocrites, literally play-actors, who played the part of spiritual maturity to the masses when in actuality they lived double lives. They prayed, gave and fasted for show while at the same time devoured widows houses according to Jesus in Matthew 6:1-18 and Mark 12:40. They appeared righteous with their words but their hearts were far from God according to Jesus in Matthew 15:7.

Jesus, though, was interested in more than having the externals right. He also wanted the internals to be healthy. He did not want people to do the right “what” (i.e. praying, giving, fasting, etc.) if they weren’t going to do it for the right “why” (i.e. God’s glory out of love rooted in truth). Right action with wrong motivation is unacceptable to the Lord since Jesus is concerned with both the action and the motivation for the action.⁵⁶ No wonder in Matthew 23, he rebuked the religious hypocrites and called them white-washed tombs that looked good on the outside but were filled with death on the inside. They were living double lives, saying one thing but doing another.

What a contrast we find with Jesus and his ministry, however. His life and ministry were rooted in truth and grace. He lived a life of authenticity. He was comfortable in His own skin, so to speak. He was capable of a full range of human emotions without apology. He could cry, get angry, be joyful, or become overwhelmed with sorrow and troubled. He could respond to people when they had a need but leave and move on to the next ministry opportunity when the Father said it was time to move on even when his disciples pleaded for him to stay because of the crowds. He could walk with the rich and stoop to sit with the poor.

Because of the love Jesus expressed, sinners felt safe to come as they were and because of the truth Jesus taught, sinners were challenged to live differently than they were. Knowing who he was, from where he had come and where he was going, he

56. Perhaps this thought is behind the rebuke Jesus gave to the church at Ephesus in Revelation 2:1-7 when he commended them for their right deeds and right doctrines but then strongly warned them, “Yet I hold this against you: You have forsaken your first love. Remember the height from which you have fallen! Repent and do the things you did at first.” They were orthodox in practice and in doctrine but apparently it was no longer for the right reason. It no longer flowed out of love for God or love for others. There was a discrepancy between the “what” and the “why” in their lives.

stooped to wash the disciples feet as a servant. No one forced him to the cross before his time and when the time came for him to die, he laid down his life of his own accord.

He was fully God, yes, but fully human as well. When we look at Jesus, we see what God intended for us in our relationship with Him and with others. It is this authenticity in Jesus' ministry that was so threatening to the double-life religious leaders of his day but so appealing to the common people. The wounded came to him and were healed. The weak came to him and found rest. The sinner came and found forgiveness.

It is this healing, rest and forgiveness so many pastors who were raised in homes where alcohol was abused need to experience, not just intellectually but experientially, if their ministries are to be healthy. It is this type of ministry and life, one of authenticity and transparency, to which we have been called. It is only possible when we are willing to address the brokenness that exists as a result of being raised in a home where alcohol was abused. Further discussion will be offered on the necessity and possibility of healing in chapter six of this thesis.

*Definition of the Church as God's Family*⁵⁷

When we fail to confess and address our brokenness, we discover that we recreate our families of origin in our churches. This point was made previously in chapter one but needs to be reiterated here as it relates to the church as God's family. When I operated

57. Many of the works cited in this note discuss the differences between healthy and unhealthy families. I have drawn from these and applied and expanded the principles to the church family in this section since the church often functions like an extended family. John Bradshaw, *Bradshaw On: the Family – a Revolutionary Way of Self-Discovery* (Pompano Beach, FL: Health Communications, Inc., 1998); Claudia Black, *It Will Never Happen to Me!* (Denver, CO: MAC Publishing, 1982); Timmen Cermak, *A Time To Heal: The Road to Recovery for Adult Children of Alcoholics* (New York: St. Martin's Press, 1988); John C. Friel and Linda D. Friel, *Adult Children: The Secrets of Dysfunctional Families* (Deerfield Beach, FL: Health Communications, Inc., 1988); Sandra D. Wilson, *Counseling Adult Children of Alcoholics*, Volume 21 of *Resources for Christian Counseling*, ed. Gary R. Collins (Dallas, TX: Word Publishing, Inc., 1989).

out of my brokenness as a result of growing up in a home where alcohol was abused, I created a situation that was familiar to me in the church by replicating what I knew growing up as a child and by doing so, I attracted people just as broken as I was. This is not surprising since it is a well-known fact among chemical dependency counselors that “people who grew up in dysfunctional families attract and are drawn to others who grew in such families. Therefore, impaired pastors often collect impaired parishioners.”⁵⁸ The church, then, ended up functioning like one large extended dysfunctional family, in this case, my own.

Charles Cosgrove and Dennis Hatfield, in their book, *Church Conflict: The Hidden Systems Behind the Fights*, confirm this fact when they write, “Our ‘families of origin’ (the families we grow up in) establish patterns of social behavior in us that we go on to replicate in the larger world, including the world of the congregation.”⁵⁹ The thesis of their seminal work is that “behind the official systems of the local church (its offices, boards, committees, etc.) there is another system, a *familylike* [emphasis original] system, which powerfully determines the way that church members relate to one another, do business together, care for one another, and fight with one another.”⁶⁰

Unfortunately, when the supposed “parent” (i.e. the pastor) of the congregation has been raised in an unhealthy or dysfunctional family as the result of alcohol abuse, he or she learned unhealthy patterns of relating, patterns which become part of the congregation. Some of the unhealthy emotional patterns which I saw replicated within

58. Stephen P. Aporp, “Drug Abuse and the Church: Are the Blind Leading the Blind?” *Christian Century* 105, no. 33 (November 9, 1988): 1012.

59. Charles H. Cosgrove, and Dennis D. Hatfield, *Church Conflict: The Hidden Systems Behind the Fights* (Nashville: Abingdon, 1994), 12.

60. *Ibid.*, 5.

the congregation I serve included denial, shaming and blaming, frozen feelings, don't talk rule, people pleasing, conflict avoidance, withdrawal, rigid roles, passive aggression, manipulation, control and lack of healthy boundaries.

One can see how these unhealthy patterns can negatively impact the family of God. In a church where people are unable to feel and express the full range of emotions in a healthy way, where no one admits to any faults, where conflict is avoided at any cost, where people are shamed into performance, where people are expected to fit into rigid roles, where no one can measure up but no one is able to talk about it, you have a recipe for disaster.

What is even more devastating to the church is that people will talk, they just won't do it directly or openly. Conflict goes underground. Frustration, gossip, and discontent bubble beneath the surface, erupting in unexpected ways and places and exploding in a destructive fashion. Over time, people will often leave, claiming that "God has called them elsewhere" rather than being honest with the pastor. Leadership never modeled honesty and authenticity with their lives so the congregation never learned how to express it either. It was all about image so the flock never learned to be real. Others come to the church and repeat the cycle over time, perpetuating the dysfunction and continually replicating the pastor's family of origin and everyone else's in the congregation. Cosgrove and Hatfield make this point when they write, "As leaders and followers in the church family, people replicate family patterns that they learned while growing up. But present or concurrent family systems also influence how they relate to one another in the congregational family."⁶¹

61. Ibid., 12.

What a contrast, however, to God's intention for the church. The Scripture refers to the church as Christ's body and God's household.⁶² In other words, the church is to reflect Christ's image, not the pastor's. The church is to function as God's family and not my family. Family life in the church is to be lived out in a healthy fashion as God is healthy rather than in an unhealthy fashion as the pastor is unhealthy.

What does an emotionally healthy church family look like? Let me suggest a number of items (although certainly not exhaustive) of critical importance to emotional health.

First, in a healthy family and church, people are not locked into rigid roles necessitated by surviving a dysfunctional family. People are lovingly directed and challenged to discover their identity in Christ and to explore the freedom in him to be what he calls them to be.

Second, there is a freedom to feel that is healthy and allows the individual to process unresolved emotions from the past. Instead of encouraging people to suppress, repress or even volcanically express their emotions in detrimental ways, leadership both models and encourages the congregation to confess their emotions to God in the context of a loving and safe community and allow the Holy Spirit to integrate these emotions back into their lives by redeeming their painful memories.⁶³ This freedom to feel allows people to begin to be real with themselves and with each other. No longer do we have to pretend that everything is fine when we are struggling. I can openly admit my feelings and be real. I don't need a mask to hide behind in a healthy church.

62. 1 Corinthians 12:11-27; Ephesians 2:19; 4:11-16; 1 Timothy 3:14-15.

63. As part of the healing process, people can be encouraged to feast on the Psalms and to consider the emotional life of Jesus to understand that spiritual health and emotional health go hand in hand and cannot be divorced from each other if a believer is to grow on to maturity.

Third, the healthy church operates with a balanced sense of biblical shame rather than in an unhealthy sense of toxic shame. Sin is called sin and truth is proclaimed but in a way that leads to God's grace through repentance, godly sorrow and restoration. Biblical shame is seen for what it is, a gift from God that leads us back to him. This contrasts with toxic shame which comes as a tool of the enemy to drive a wedge between us and God and others. It doesn't lead to restoration but condemnation. It sets up a standard but provides no way of escape. It destroys the foundation of one's trust in God by attacking the very nature of one's identity.

In his book, *Shame and Grace: Healing the Shame We Don't Deserve*, author Lewis Smedes explains the effect of toxic shame when he writes that "the feeling of shame is about our very *selves* – not about some bad thing we *did* or *said* but about what we *are* [emphasis original]."⁶⁴ With biblical shame, there is an understanding that I have sinned and failed but there is salvation in Christ. With toxic shame, I am sin and a failure and beyond hope. Toxic shame stamps us with a rejected label from which we can't escape as John Bradshaw points out in his book, *Healing the Shame that Binds You*:

What I discovered was that *shame as a healthy human emotion can be transformed into shame as a state of being. As a state of being, shame takes over one's whole identity. To have shame as an identity is to believe that one's being is flawed, that one is defective as a human being. Once shame is transformed into an identity, it becomes toxic and dehumanizing* [emphasis original].⁶⁵

Such shame is prevalent in dysfunctional families, like those where alcohol was abused, and it gets passed on generationally both within families and within congregations. It is the antithesis of the gospel and detrimental to spiritual life.

64. Lewis B. Smedes, *Shame and Grace: Healing the Shame We Don't Deserve* (New York: HarperSan Francisco, 1993), 6.

65. John Bradshaw, *Bradshaw On: Healing the Shame that Binds You* (Deerfield Beach, FL: Health Communications, Inc., 1988), vii.

Fourth, in a healthy church, people speak the truth in love. In other words, there is no “can’t talk” rule. Folks have come to understand and live out the beautiful balance of both love and truth. People are able to speak freely and truthfully, but it is done in a loving fashion for the good of the person and the health of the family.

Since love and truth are both at work, sin is addressed but redemption is possible. Issues are confronted but in a way that respects the individual, the church family and the process. The process is valued because, in a healthy church, people realize that conflict is inevitable but combat is a choice. People choose to use conflict as a steppingstone to growth rather than as a springboard to war. Passive aggressive responses and actions are no longer acceptable because they violate the law of love. Since people are free to feel, as well as are challenged to deal with issues openly instead of burying them, underground conflict diminishes. There is also a consistency in what we say and what we mean. We don’t have to use double talk, mixed messages or manipulation in a healthy church. Our words, feelings and thoughts are congruent and real. There is an authenticity and transparency that develops and is encouraged.

Fifth, in a healthy church, there is a sense of teamwork, a feeling that we are in this together, that we are doing life together. Since people are not focused on appearance management or living behind a mask with frozen feelings in a healthy church, real relationships are possible along with healthy intimacy. Emotional energy that has been wasted trying to keep up an image is now available to devote to relationships in the family of God. Folks in a healthy church recognize that such relationships are critical to spiritual growth and pursue them intentionally knowing that any conflicts that arise in those relationships simply expose areas where God desires to work to produce greater

maturity. People are encouraged to discover their place and gifting in the body of Christ and to share their talents, time and table (i.e. meals) with each other. People are respected for who they are and whatever part God calls them to play in Christ's body.

Finally, in a healthy church, there is sense of rhythm and balance in the body. No longer do people have to operate as spiritual workaholics, struggling to meet the expectations of an unhealthy parent, expectations they have projected on God. Instead, having tasted the amazing grace and spiritual and emotional restoration of God, people are free "to be" and free "to do" in the body of Christ, living life as a delight instead of a duty, as a joy instead of a job. Through the power of the Holy Spirit and in relationship to one another, the healthy church, God's household, lives in wonderful rhythms of grace.

Growing up in a home where alcohol was abused can affect so much of the pastor's life, relationships and ministry. It can lead to a distortion of Scripture, the development of unhealthy and unbiblical motivations for ministry and the replication of family of origin issues in the congregation. God, however, has a different plan in mind. Through his grace and truth, pastors can experience his healing power, a healing that is able to bring a balance to interpreting Scripture with regard to conflict avoidance, people pleasing, perfectionism, empathy and sensitivity. They can also develop a biblical and healthy motivation for ministry that is for God's glory, prompted by love and rooted in truth. Finally, pastors can lead congregations that no longer are conformed to their image but Christ's, where people live by the Spirit in wonderful rhythms of grace as God's family. In so doing, they will find themselves, with integrity, living out the shepherd's mandate found in 1 Peter 5:2-4:

Be shepherds of God's flock that is under your care, serving as overseers-not because you must, but because you are willing, as God wants you to be; not

greedy for money, but eager to serve; not lording it over those entrusted to you, but being examples to the flock. And when the Chief Shepherd appears, you will receive the crown of glory that will never fade away.

Chapter 3

Literature Review

History of the Movement

The Adult Children of Alcoholics movement is a fairly recent phenomenon, as is the burgeoning literature associated with it. Prior to the early 1980s, very little activity or writings were directed towards those who grew up in homes where alcohol was abused.

To be sure, there were some attempts to address the topic as early as the turn of the 20th century. Kenneth Sher, author of the work, *Children of Alcoholics: A Critical Appraisal of Theory and Research*, traces the history of the movement back to two scholarly attempts, one by W.C Sullivan in 1899 and the other by T. A. MacNicholl in 1905, where Sullivan studied the effects of maternal alcoholism on offspring while MacNicholl examined alcoholism's effects on school children.⁶⁶ Nonetheless, for fifty years their initial insight and work were not actively pursued by other professionals in the field.

In 1955, however, alcoholism was recognized as a disease by the American Medical Association, which, in turn, led to a slow but increasingly clear understanding that the alcoholic family suffers along with the alcoholic. For example, Margaret Cork's book, *The Forgotten Children*, published in 1969, focused attention specifically on school-aged children of alcoholics and the variety of problems they suffered, a focus

66. Kenneth J. Sher, *Children of Alcoholics: A Critical Appraisal of Theory and Research* (Chicago: University of Chicago Press, 1991), 149.

according to Sher that raised interest both in the popular arena and the clinical field regarding children of alcoholics.⁶⁷

By the 1970s and early 1980s, acknowledgment was given not just to the children of alcoholics but to the adult survivors as well. Sher makes reference to the scholarly reviews of the early empirical literature that were completed by N. El-Guebaly and D.R. Offord in 1977 and 1979, reviews that he asserts “pointed out the documented problems that offspring of alcoholic parents exhibit across the life span.”⁶⁸ Works by additional authors addressing the issue soon followed.

If the growing awareness of the problems for the children of alcoholics persisting into adulthood was becoming a groundswell, then 1983 saw it turn into a tidal wave as a result of two key events. On Valentine’s Day, the National Association for Adult Children of Alcoholics was officially formed and Janet Woititz’s pioneering work, *Adult Children of Alcoholics*, was published. The field has blossomed tremendously ever since with hundreds of journal articles and books being published on the subject along with the development of numerous websites with multiple links dedicated to providing help and information to those who grew up in homes where alcohol was abused.⁶⁹

Clinical Literature

The vast amount of literature over the past twenty-five years has been written from two different yet interrelated and ultimately, as time has passed, complementary

67. Margaret Cork, *The Forgotten Children* (Toronto: Addiction Research Foundation, 1969). Sher references this book and its importance in his work on page 149 but I was unable to secure a copy of it. In his bibliography, Sher provides the above citation.

68. Sher, 149.

69. See the bibliography for a number of these articles and books. Two examples of websites are <http://www.alcoholism.about.com> and <http://www.recovery.org/acoa/acoa.html> [accessed January 30, 2008].

perspectives. The first main division or branch of literature that appeared was written primarily by clinicians, those professionals working with clients in the clinical arena (e.g. social workers, counselors, pastors, and treatment providers, etc.). Many of these caregivers found themselves working with individuals who grew up in homes where alcohol was abused. Much of the literature in this area, therefore, is based on clinical impressions, case histories, and anecdotal evidence. Woititz's book, along with the books or articles by Claudia Black, Rachel Callahan and Rea McDonnell, Timmen Cermak, Paul Curtin, John and Linda Friel, Geraldine Glover, Herbert Gravitv and Julie Bowden, Earnie Larsen, Jane Middleton-Moz and Lorie Dwinell, Sam Norman, Thomas Perrin, Darryl Quick, Judith Seixas and Geradine Youcha, Charles Sell, Sharon Wegscheider-Cruse, and Barbara Wood are examples of this branch of literature.⁷⁰

This literature branch, for the most part, was written with the layperson in mind, to provide a clear understanding of the issues surrounding adult children of alcoholics

70. Janet G. Woititz, *Adult Children of Alcoholics* (Deerfield Beach, FL: Health Communications, Inc., 1983); Claudia Black, *It Will Never Happen to Me!* (Denver, CO: MAC Publishing, 1982); Rachel Callahan and Rea McDonnell, *Hope for Healing: Good News for Adult Children of Alcoholics* (Mahwah, NJ: Paulist Press, 1987); Timmen L. Cermak, *A Primer on Adult Children of Alcoholics* (Deerfield Beach, FL: Health Communications, Inc., 1989); Paul Curtin, *Hidden Riches: Stories of ACOAs on the Journey of Recovery* (New York: Continuum, 1991); John C. Friel and Linda D. Friel, *Adult Children: The Secrets of Dysfunctional Families* (Deerfield Beach, FL: Health Communications, Inc., 1988); Geraldine J. Glover, "The Hero Child in the Alcoholic Home: Recommendations for Counselors," *School Counselor* 41, no. 3 (January 1994): 3-5; Herbert L. Gravitv and Julie D. Bowden, *Recovery: A Guide for Adult Children of Alcoholics* (New York: Simon & Schuster, 1987); Earnie Larsen, *Old Patterns, New Truths: Beyond the Adult Child Syndrome* (San Francisco: Harper & Row, 1988); Jane Middleton-Moz and Lorie Dwinell, *After the Tears: Reclaiming the Personal Losses of Childhood* (Pompano Beach, FL: Health Communications, 1986); Sam R. Norman, "Adult Children of Alcoholics: A Self Portrait," *Journal of Pastoral Care* 42 (Spring 1988): 77-80; Thomas W. Perrin, *I Am an Adult Who Grew Up in an Alcoholic Family* (New York: The Continuum Publishing Company 1991); Daryl E. Quick, *The Healing Journey for Adult Children of Alcoholics* (Downers Grove, IL: InterVarsity Press, 1990); Judith S. Seixas and Geraldine Youcha, *Children of Alcoholism: A Survivor's Manual* (New York: Harper & Row, 1985); C.M. Sell, "Sins of the Fathers (and Mothers)," *Christianity Today*, Dec 10, 1990, 20-23; Sharon Wegscheider-Cruse, *Choice Making for Co-Dependents, Adult Children and Spirituality Seekers* (Deerfield Beach, FL: Health Communications, Inc., 1985); Barbara L. Wood, *Children of Alcoholism: The Struggle for Self and Intimacy in Adult Life* (New York: New York University Press, 1987).

and to provide a way for those who came from such homes to be able to heal and move forward with their lives. Most of the books and articles written by the authors cited in the previous paragraph follow a similar style and pattern. Technical language is usually limited. The characteristics associated with adult children of alcoholics are regularly described and illustrated. Self-help methods are usually included based upon the author's perspective, although one can certainly find overlap in the solutions from book to book, as will be noted along the way.

While an examination of all the clinical works cited in the note on the previous page is beyond the scope of this thesis, a review of a number of the books/articles will be helpful in observing the pattern and elucidating a number of key concepts proposed in the clinical literature. Woititz and Perrin, two pioneers in the movement, open their respective works by introducing the overall phenomenon of adult children of alcoholics and then quickly turn to an examination of the characteristics of the adult child. As previously mentioned in chapter one, Woititz lists thirteen characteristics while Perrin adds seven beyond this. Each characteristic is elaborated on and discussed with Woititz preferring to write in the second person as if she were conducting a small group for Adult Children of Alcoholics (e.g. "The double messages you received as a child caused you to lose sight of yourself. . . .Therefore, your sense of self is distorted. . . .What you do know is that you never really fit in, and you can't figure out why."⁷¹), while Perrin writes from a first person perspective as if he is sharing his life story with the reader (e.g. "To put it another way, I was loyal to the wrong people, for the wrong reasons, for much longer

71. Woititz, *Adult Children of Alcoholics*, 22.

than was good for me. . . . We need to learn how to give up our fear of failure, our need to be liked and our need to hang on forever.”⁷²).

Having identified the problem, both Woititz and Perrin move to practical solutions with Woititz revisiting the thirteen characteristics and providing counsel on how to overcome each of the issues as well as how to make a healthy home for the children of the children of alcoholics.⁷³ Perrin, in a more circuitous route, first examines what he believes are the nine stages of growth adult children of alcoholics go through in recovery (i.e. isolation and denial, anger, postponement, depression, acceptance, hope, spirituality, resolution and getting on with it) and then launches into a discussion of alcoholism, its etiology and its treatment before concluding with practical skills for recovery particularly with respect to dealing with feelings and forgiving one’s parents.⁷⁴

Black, whose book was written prior to the formation of the National Association for Children of Alcoholics organization and the publication of Woititz’ book, actually anticipates those who will follow by identifying the salient issues related to growing up in a home where alcohol was abused. Most of the writers who follow refer to her foundational work. Particularly noteworthy is her understanding of family rules in the alcoholic home and her development of a construct of family roles that children of alcoholics assume in the home as a way of providing balance and stability to an unstable family. While these roles were previously touched upon in chapter one, a further analysis is in order.

72. Perrin, 35-36.

73. Woititz, *Adult Children of Alcoholics*, 54-102.

74. Perrin, 50-143.

Black initially describes three roles: the “Responsible One,” the “Adjuster,” and the “Placater.” She later adds a fourth: the “Acting Out” child.⁷⁵ Black’s responsible child is usually the firstborn, provides a sense of respectability, structure and pride for the family, is perfectionistic and pseudomature.⁷⁶

The child who acts out is often the second born. Since the positive attention is usually taken by the responsible child, the acting out child gains attention negatively by being rebellious, disobedient, acting tough, getting into trouble, etc. He or she serves the family by drawing attention away from the alcoholic and, in a sense, keeping the family together by forcing the parents to work together on dealing with the pressing needs of the acting out child.⁷⁷

The adjuster is often the third child. Since all the attention, as well as the energy, is taken up with the successes of the responsible one and the failures of the acting out child, there isn’t much left for this child. As a result, he or she doesn’t make any demands upon the family system. As Black makes clear, “Adjusting children find it wiser to follow, and simply not draw attention to themselves.”⁷⁸ They are often loners, daydreamers, not wanting to be a bother to anyone.⁷⁹

Black’s fourth role, the placater, is the sensitive child, the nice boy or girl who is well-liked and attuned to what is going on in everyone around him or her and tries to keep everyone happy. Unfortunately, placaters rarely allow themselves to feel what is going on inside of their own heart because the pain is too great.⁸⁰

75. Black, 17-27.

76. Ibid., 17-20.

77. Ibid., 25-27.

78. Ibid., 22.

79. Ibid., 21-23.

80. Ibid., 23-25.

Each of these roles, according to Black, is produced by the family system in order to keep it in a dysfunctional equilibrium. The tragedy is that the roles continue to be played out in adulthood. Regarding the responsible ones, Black notes, “As adults, they find no reason to change these patterns which have always ensured survival. . . . He or she continues to take charge, and often assumes leadership roles.”⁸¹ The adjuster children, “those children who found it so much easier to shrug their shoulders and withdraw upstairs to the bedroom, or slip out to a friend’s house, usually continue these survival patterns into their grown-up years,” while the acting out children who were in trouble and caused trouble as children “continue to find conflicts in early adulthood.”⁸² Not to be outdone by the other roles, the placater, “the child who was busy taking care of everyone else’s emotional needs – the warm, sensitive, caring, listening child, the one everyone likes, grows up continuing to take care of others, either personally or occupationally.”⁸³

Wegscheider-Cruse, in her book, *Choice Making for Co-Dependents, Adult Children and Spirituality Seekers*, affirms the ideas of her mentor, Black, regarding family roles but renames the roles in a way that has become the predominate nomenclature in the clinical literature.⁸⁴ She calls the responsible child the “Family Hero,” the child who acts out the “Scapegoat,” and she renames the adjuster as the “Lost Child.” For Black’s placater, Wegscheider-Cruse suggests the role of “Mascot.” While there is some overlap between these two roles, they almost appear to be different roles

81. Ibid., 53.

82. Ibid., 57,62.

83. Ibid., 59.

84. Wegscheider-Cruse, 43.

rather than simply different terminology. Sandra Wilson, in her book, *Counseling Adult Children of Alcoholics*, however, considers the roles to be similar.⁸⁵

In Wegscheider-Cruse's construct, the mascot is the class clown, the one who always wants to be the center of attention and who uses humor and silliness to try to keep everyone happy and to smooth over the conflict.⁸⁶ As does Black, Wegscheider-Cruse also claims these roles follow children of alcoholics into adulthood but she affirms that with help and healing, adult children can turn these roles from deficits into assets.⁸⁷

Cermak, Middleton-Moz and Dwinell, and Quick follow the typical patterns laid out the clinical literature, as well, by identifying the problem, describing the characteristics and then providing a solution. Timmen Cermak, a founding member of the National Association for Children of Alcoholics and the first president of the organization, provides a brief but readable overview of the issues surrounding adult children of alcoholics in his book, *A Primer on Adult Children of Alcoholics*, including the connection to codependency, seventeen characteristics of those raised in homes where alcohol was abused and a comparison of the needs and experiences of healthy families versus unhealthy families.⁸⁸

In another book, *A Time to Heal: The Road to Recovery for Adult Children of Alcoholics*, Cermak focuses more on the healing process and points out how growing up in a home where alcohol was abused can actually prove beneficial in the long run as healing takes place when he writes, "The healing during the first three stages has freed you from being a prisoner to these survival skills, and you have the ability to use them or

85. Sandra D. Wilson, *Counseling Adult Children of Alcoholics*, Volume 21 of *Resources for Christian Counseling*, ed. Gary R. Collins (Dallas, TX: Word Publishing, Inc., 1989), 57.

86. Wegscheider-Cruse, 43.

87. Ibid.

88. Cermak, *A Primer*, 1-47.

not, depending on your current needs. . . . Many of your ACA characteristics, if they are allowed to play a proper role in your life, can become assets.”⁸⁹ This, of course, serves to confirm part of the basis for the thesis under consideration, that there are positive characteristics along with negative ones in growing up in a home where alcohol was abused.

Middleton-Moz and Dwinell provide a much deeper and fuller analysis of the issues beyond that which Cermak provides, with a particularly intensive focus on the psychological underpinnings behind adult children of alcoholic issues. Like Perrin, they focus on the importance of feeling, especially the need to do grief work, in order to deal with the underlying depression associated with many adult children of alcoholics.⁹⁰

Quick, also like Perrin, takes great pains and four chapters to emphasize the importance of being able to express our feelings as part of the healing process, while at the same addressing the importance of recovering from unhealthy patterns of thought by renewing our minds and challenging our self-talk. Quick, however, grounds his counsel regarding emotions and mind renewal in the context of a biblical relationship with God as a safe and loving Father.⁹¹

Gravitz and Bowden and Curtin, while addressing the same issues, characteristics, and solutions as the other authors above, do so in a somewhat different format that is quite effective. Gravitz and Bowden, both founding Board Members of the National Association for Children of Alcoholics, develop their book along the lines of a question and answer format. By way of seventy-nine questions and answers, the authors explore

89. Timmen Cermak, *A Time To Heal: The Road to Recovery for Adult Children of Alcoholics*. (New York: St. Martin's Press, 1988), 160-161.

90. Middleton-Moz and Dwinell, 41-61.

91. Quick, 24-126.

the issues related to adult children of alcoholics and what they consider to be six predictable stages in the recovery process (i.e. survival, emergent awareness, core issues, transformations, integration, and genesis).⁹² These stages have some overlap with Perrin's list.

Interestingly enough, for both Gravitz and Bowden and Perrin, spirituality is part of the healing process but in a vague, nondescript way. Indeed, Gravitz and Bowden stress this fact regarding the genesis stage when they write, "While genesis does consist of a commitment to a power beyond one's self and beyond the visible, observable world, it does not require participation in a particular, organized religion. Genesis speaks to universal concerns and is non-denominational."⁹³ Such an approach, obviously, would be contrary to an evangelical Christianity and more akin to an eclectic, new age spirituality of a higher power as one understands him rather than to the God of Scripture.

Curtin takes a different approach than those authors examined thus far and utilizes case histories/stories of members of an adult children of alcoholics group to bring different truths to light as they pertain to lives of individuals raised in homes where alcohol was abused. Indeed, as Curtin points out in his introduction, "The quickest way to the truth is through a story. This is a book of stories that show adult children of alcoholics (ACOA's) building a foundation of recovery upon their everyday life experiences."⁹⁴

As more and more stories like those described by Curtin were being shared by more and more people and the concept of being an adult child of an alcoholic was gaining popular acceptance, the media embraced the concept and a social movement began to

92. Gravitz and Bowden, 18-145.

93. Ibid., 104-105.

94. Curtin, 11.

sweep the country as is evidenced by the number of articles that appeared in more popular journals regarding ACOA issues, codependency, ACOA groups, etc. For example, *Psychology Today*, in 1987, featured an article by then assistant editor, Elizabeth Stark, on what she called “Forgotten Victims” in reference to the children of alcoholics. Stark provides a readable condensed overview of the issues associated with growing up in a home where alcohol is abused and its impact on children and adult children of alcoholics. She concludes by providing some practical suggestions on how to target these sometimes forgotten victims.⁹⁵

The church world was also impacted by this social movement and articles appeared in a number of its magazines on the subject. For example, *Christianity Today* devoted much space in one of its issues in 1988 to an extensive coverage of the subject of addiction and therapy including a discussion on the adult child movement and codependency.⁹⁶ Two years later, in 1990, the magazine tackled the subject of adult children of alcoholics again in an article by Trinity Evangelical Divinity School professor of education, C. M. Sell.⁹⁷

That same year, Victoria Rebeck, associate editor of *Christian Ministry* at the time, directed her focus towards the similarities that exist between dysfunctional families and dysfunctional churches and ways to break the cycle.⁹⁸ Marion Aldridge, also writing

95. Elizabeth Stark, “Forgotten Victims: Children of Alcoholics,” *Psychology Today*, Jan 1987, 58-62.

96. Jim Alsdorf and Phyllis Alsdorf, “The ‘Generic Disease’,” *Christianity Today*, Dec 9, 1988, 29-41; Jim Alsdorf and Phyllis Alsdorf, “In Colorado Springs: A Church Reaches Out,” *Christianity Today*, Dec 9, 1988, 32-33; Richard Mouw, “The Life of Bondage in the Light of Grace: An Interview with Richard Mouw,” Interview by David Neff, *Christianity Today*, Dec 9, 1988, 41-44.

97. Sell, 20-23.

98. Victoria Rebeck, “Congregations Often Act Like Dysfunctional Families,” *Christian Ministry* 21, no. 1 (Jan-Feb 1990): 14-16.

for *Christian Ministry*, later that same year treated the subject of codependency and how it can be overcome.⁹⁹

Empirical Literature

The sudden rise of this social movement triggered an interesting reaction in the scientific world: suspicion. Part of this response, according to Stephanie Brown, one of the original founders of the National Association for Children of Alcoholics and a current advisory board member, was due to the fact that “the social movement was far ahead of professionals in its knowledge base and legitimacy.”¹⁰⁰ She goes on to add that “the professional world felt challenged by this idea and frequently responded with skepticism, resistance and anger toward the popular press, and, unfortunately, to the idea itself.”¹⁰¹

It’s been said that a man with an argument is at the mercy of a man with an experience. Such was the case in the early days of the movement. According to Brown, “There was a feeling of urgency and emotional venting that shocked the professional world. . . . And many were wary of the intensity of feeling unleashed by the simple act of naming and describing reality.”¹⁰² People were seeking professional treatment for what they saw as issues related to growing up in homes where alcohol was abused, joining ACOA groups, and implementing self-help ideas presented in the clinical literature. They were not waiting around for someone to test a thesis or hypothesis to explain whether the characteristics were valid or not or whether a recovery program worked or not. Many individuals saw only the fact that someone had identified what they had experienced and

99. Marion D. Aldridge, “Faith and Codependency,” *Christian Ministry*, May-June 1990, 7-8.

100. Stephanie Brown, “ACA’s Today,” *NACoA Network* 17, no. 3 (Summer 2001): 4.

101. *Ibid.*, 4.

102. *Ibid.*

was offering a way to move towards healing and wholeness and they grabbed on to it with many people experiencing positive change.

Nonetheless, empirical research did follow and the resulting reports, articles and books form the basis for the second main division or branch of literature that appeared. Written mainly by researchers and the scientific community, these scientific reports often utilized technical language, advanced psychological and statistical analysis and appeared in specialized professional journals. Many, if not most, of these reports were written in an attempt to test empirically the hypotheses propounded in the clinical literature.

Alford, Devine and Braithwaite, as well as Veronie and Frueshstorfer, all examined some aspect of family roles in children of alcoholics.¹⁰³ Baker and Stephenson tested the validity of some of the characteristics postulated by Woititz as being associated with ACOA.¹⁰⁴ Ballard and Cummings, as well as Hart and McAleer, focused on the issue of anger.¹⁰⁵ Beesly and Stoltenberg examined the need for control and attachment with Jaeger et al. also focusing on attachment.¹⁰⁶ Berkowitz and Perkins explored

103. Karola M. Alford, "Family Roles, Alcoholism, and Family Dysfunction," *Journal of Mental Health Counseling* 20, no. 3 (July 1998): 250-260; Cindy Devine and Valerie Braithwaite, "The Survival Roles of Children of Alcoholics: Their Measurement and Validity," *Addiction* 88, no. 1 (January 1993): 69-78; Linda Veronie and David B. Frueshstorfer, "Gender, Birth Order and Family Role Identification Among Adult Children of Alcoholics," *Current Psychology* 20, no. 1 (Spring 2001): 53-67.

104. Diane E. Baker and Laura A. Stephenson, "Personality Characteristics of Adult Children of Alcoholics," *Journal of Clinical Psychology* 51, no. 5 (1995): 694-702.

105. Mary Ballard and E. Mark Cummings, "Response to Adults' Angry Behavior in Children of Alcoholic and Nonalcoholic Parents," *Journal of Genetic Psychology* 151, no. 2 (June 1990): 195-209; Kenneth E. Hart and Margaret McAleer, "Anger Coping Style in Adult Children of Alcoholics," *Addiction Research* 5, no. 6 (December 1997): 473-485.

106. Denise Beesley and Cal D. Stoltenberg, "Control, Attachment Style, and Relationship Satisfaction Among Adult Children of Alcoholics," *Journal of Mental Health Counseling* 24, no. 4 (Oct 2002): 281-298; Elizabeth Jaeger, Nancy B Hahn, and Marsha Weinraub, "Attachment in Adult Daughters of Alcoholic Fathers," *Addiction* 95, no. 2 (Feb 2000): 267-276.

personality characteristics of ACOA as did Seefeldt and Lyon, while Carter et al. investigated communication patterns of adult children of alcoholics.¹⁰⁷

As with the clinical literature, these empirical reports often follow a similar pattern as well. Usually, the report begins with some recognition of the problems associated with adult children of alcoholics. This recognition may be fairly brief, a paragraph or two, or quite lengthy. Often, reference is made to the claims found in the clinical literature regarding some aspect of the problems purported to be connected with growing up in a home where alcohol was abused. Usually, the author(s) then transition to the purpose of their study as it relates to some research question(s) or hypothesis(es), what has been done in the past and how their work will either build on this previous work or open up a new field of study. The design of the study is then presented, including the composition of the sample and, if present, any control group(s), along with the methodology employed, tests utilized and their validity, etc. Results of the study are given, followed by a discussion of the significance of the findings along with any limitations of the research and possible avenues for further exploration.

While a complete examination of the various studies mentioned heretofore, not to mention the additional studies found in the bibliography, is certainly beyond the scope of this literature review, a review of one of the reports would be helpful in observing the pattern firsthand. Alford, writing in the *Journal of Mental Health Counseling*, sought to answer a number of questions related to the assertion by Black and Wegscheider-Cruse

107. Alan Berkowitz and H. Wesley Perkins, "Personality Characteristics of Children of Alcoholics," *Journal of Consulting and Clinical Psychology* 56, no. 2 (April 1988): 206-209; Richard W. Seefeldt and Mark A. Lyon, "Personality Characteristics of Adult Children of Alcoholics," *Journal of Counseling & Development* 70, no. 5 (May/June 1992): 588-593; Cathleen Carter et al., "Communicative Competence in Sons of Alcoholics," *British Journal of Addiction* 85, no. 9 (September 1990): 1157-1163.

that children of alcoholics take on rigid roles in the family as a way of coping with the stress of growing up in an alcoholic home.¹⁰⁸

After reviewing briefly family systems theory (i.e. the family is not just a number of individuals but interrelated parts functioning as within a system, with each member affecting the other members and vice-versa), Alford discusses the four traditional roles proposed by Wegscheider-Cruse (hero, scapegoat, lost child and mascot), their purported purpose, their usage in clinical work but their lack of empirical substantiation to date, and concludes the introductory material by laying out four research questions which are to be examined as a means of testing the validity of the roles. The first two questions, “Do ACOA exhibit differences in the type of role taken on in the family as compared to role identification in non-ACOA?” and “Do ACOA exhibit a different degree of role identification as compared to non-ACOA?”¹⁰⁹ are illustrative of the types of questions the researcher investigates as he or she seeks to empirically prove or disprove the accepted clinical or popular position.

This particular study, as many of the studies do, relies on a sample derived from undergraduate students at a university. After differentiating three groups of students based upon the criteria of alcoholism in the family, dysfunction in the family but absence of alcohol or a normal family group, Alford utilized testing measures found in the field to attempt to answer the four research questions she was studying. She concludes with a discussion of the results, limitations of the study and future avenues of exploration.

Alford’s work and report is not only a fine example of the typical pattern found in the scientific reports but it also points out an example of where the empirical results

108. Alford, 250-251.

109. Ibid., 251.

differ from the clinical assertions. Whereas both Claudia Black and Wegscheider-Cruse believe the roles are linked to the alcoholic home, Alford asserts, based on her research, that “it was family dysfunction, independent of parental alcohol use, that had a greater impact on the type of role as well as the strength of role identification in the family” and that “it is time for the conceptualizations regarding adult children of alcoholics to give way to a broader, richer perspective that takes into account the many complex factors that differentiate individual development.”¹¹⁰

Empirical findings differing from clinical assumptions and assertions are not unique to Alford’s work. Baker and Stephenson’s study, as well as Lyon and Seefeldt’s work, failed to support Woititz’s characterization of adult children of alcoholics.¹¹¹ Shemwell, Dickey and Wittig’s research led them to the same conclusion.¹¹² Havey, Boswell and Romans concluded from their results that Woititz’s traits do not generalize to a non-clinical sample.¹¹³

George et al., in their study, found no support for adult children of alcoholics possessing more of the signature traits postulated by the clinical movement than adult non-children of alcoholics.¹¹⁴ Segrin and Menees’s research revealed “no significant differences in adult children’s social skills as a function of parental alcoholism” and, as a result they deduced “children may exhibit undisturbed psychosocial functioning despite

110. Alford, 258-259.

111. Baker and Stephenson, 701; Richard W. Seefeldt and Mark A. Lyon, 588-593; Mark A. Lyon and Richard W. Seefeldt, “Failure to Validate Personality Characteristics of Adult Children of Alcoholics: A Replication and Extension,” *Alcoholism Treatment Quarterly* 12, no. 3 (1995): 69-85.

112. G. Henry Shemwell, Jr., Katherine D. Dickey, and Timothy A. Wittig, “Adult Children of Alcoholics: An Examination of the Category,” *Journal of Alcohol & Drug Education* 40, no. 3 (Spring 1995): 109-118.

113. J. Michael Havey, Donald Boswell, and J.S.C. Romans, “The Relationship of Self-perception and Stress in Adult Children of Alcoholics and Their Peers,” *Journal of Drug Education* 25, no. 1 (1995): 23-29.

114. William H. George et al., “Alcoholic Parentage, Self-Labeling, and Endorsement of ACOC-Codependent Traits,” *Psychology of Addictive Behaviors* 13, no. 1 (March 1999): 39-48.

having an alcoholic parent.”¹¹⁵ Dodd and Roberts conclude from their study that, contrary to the clinical literature, adult children of alcoholics are not distinct from adult non-children of alcoholics with regard to levels of self-esteem, depression, and anxiety.¹¹⁶

Such findings led a number of researchers to question the validity of both the adult children of alcoholics terminology and the construct itself. Both Windle and Searles, in their book, *Children of Alcoholics: Critical Perspectives*, assert that “with respect to adult children of alcoholics (ACOAs), a cottage industry has evolved for counseling and ‘treatment’ that has very limited scientific support.”¹¹⁷ They claim that “clinicians, and to some extent researchers, tend to ignore or reinterpret research findings that do not fit their theoretical orientation or personal world view . . .”¹¹⁸

Some researchers have also focused on the fact that most of the popular literature was based upon clinical samples and derived from individuals who came for treatment or who were involved in ACOA groups already and that such individuals would have more pronounced problems than a non-clinical sample. Thus, any conclusions drawn are based upon skewed samples and could by no means automatically be applied to the ACOA group at large.¹¹⁹

Others asserted that the characteristics postulated by clinicians are so vague that most people would agree to some of these criteria regardless of whether they were adult

115. Chris Segrin and Michelle M. Menees, “The Impact of Coping Styles and Family Communication On the Social Skills of Children of Alcoholics,” *Journal of Studies on Alcohol* 57, no. 1 (January 1996): 29-33.

116. David T. Dodd and Richard L. Roberts, “Differences Among Adult COAs and Adult Non-COAs on Levels of Self-Esteem, Depression, and Anxiety,” *Journal of Addictions & Offender Counseling* 14, no. 2 (April 1994): 49-56.

117. Michael Windle and John S. Searles, eds., *Children of Alcoholics: Critical Perspectives* (New York: The Guilford Press, 1990), 2-3.

118. *Ibid.*, 2.

119. Susan Kashubeck, “Adult Children of Alcoholics and Psychological Distress,” *Journal of Counseling & Development* 72, no. 5 (May-June 1994): 538.

children of alcoholics or not. In other words, the characteristics associated with the clinical findings were allegedly not concise enough to differentiate a specific group of people as having problems because of growing up a home where alcohol was abused from those who did not.¹²⁰ Indeed, as Searles and Windle attest, “Symptoms presumably linked to being an ACOA (such as low self-esteem, chronic depression, or difficulty in forming close personal relationships) are not uniquely associated with being a child of an alcohol-abusing parent.”¹²¹

However, the empirical research is not as negative as some opponents of the ACOA movement would make it out to be. Indeed, some of the empirical research, rather than disproving clinical assumptions, actually supports them, thus adding to the confusion for some researchers. For example, the research of Beesley and Stoltenberg suggests that adult children of alcoholics report “a significantly higher need for control and significantly lower relationship satisfaction” than do those who were not raised in homes where alcohol was abused.¹²² Adult daughters of alcoholics were shown to have “significantly more insecure attachment” than adult daughters of non-alcoholic fathers, while sons of alcoholic fathers were shown to have “lower levels of communicative competence” than sons of non-alcoholic fathers according to other empirical research.¹²³ Hart and McAleer’s findings support the hypothesis, consistent with clinical observations, that when adult children of alcoholics experience anger, they are more like than adult non-children of alcoholics to adopt an “anger suppression” style of coping.¹²⁴

120. Mary B. Logue, Kenneth J. Sher, and Peter A. Frensch, “Purported Characteristics of Adult Children of Alcoholics: A Possible ‘Barnum Effect’,” *Professional Psychology: Research and Practice* 23, no. 3 (June 1992): 226-232; George et al., 43-44.

121. Windle and Searles, 3.

122. Beesely and Stoltenberg, 292.

123. Jaeger, Hahn, and Weinraub, 267-276; Carter et al., 1157-1163.

124. Hart and McAleer, 481-482.

While some researchers found negative confirmation to the clinical literature and others positive confirmation, some research produced mixed results, in which several of the issues raised by the clinical literature were supported by the research but others were not. For example, Berkowitz and Perkins reported that “although COA respondents were similar to their peers on most personality measures, they were more likely to report greater self-depreciation.”¹²⁵ Devine, contrary to Alford, did find some evidence for associating at least some of the family roles to the influence of parental alcoholism.¹²⁶ Wilson, based upon her research with evangelical Christians, concluded that “evangelical Christian adult children of alcoholics, as compared with evangelical Christian adult children of nonalcoholics, appeared to be significantly more depressed, self-blaming and distrustful.”¹²⁷ However, contrary to the clinical literature, her sample group did not reveal any significant difference on denial of feelings or the need to be in control.”¹²⁸

Synthesis in the Literature

With clinical observations and case histories suggesting one thing and the empirical research supporting some of the assertions while disproving others, there is a need to ascertain the source of the inconsistencies. Two main explanations have been suggested and both, no doubt, have validity. First of all, critical reviews of the research, such as were done by Kenneth Sher and Michael Windle and John Searles, lead to the conclusion that some of the discrepancies are due to methodological issues.¹²⁹

Inconsistent samples (clinical versus non-clinical), insufficient or inadequate testing

125. Berkowitz and Perkins, 206-209.

126. Devine and Braithwaite, 75-77.

127. Sandra D. Wilson, “Evangelical Christian Adult Children of Alcoholics: A Preliminary Study,” *Journal of Psychology and Theology* 17, no. 3 (Fall 1989): 268.

128. *Ibid.*, 269-270.

129. Sher, 171; Windle and Searles, 2.

materials (e.g. materials that were adapted for the research but may not target correctly the characteristic under consideration), self-reporting instruments that rely on memories that may not be accurate and/or are not verified independently, etc. can all contribute to inconsistent data and probably did so in some cases. For example, in many of the empirical studies, different measures were used to determine the identity of the child of the alcoholic, each with different criteria.¹³⁰ Certainly, this could have affected the results by contaminating samples (i.e. individuals were placed in the wrong group for research, thus, distorting the results).

One major factor in methodology that could have skewed the results of the empirical research against the clinical literature is astutely pointed out by Vail, Protinsky and Prouty. According to their research, of ninety-eight studies on adult children of alcoholics, published between 1986-1995, over half (61%) involved college students, and many of these were psychology undergraduates.¹³¹ To base our knowledge of adult children of alcoholics primarily on late adolescent and young adult children of alcoholics in a college setting, and psychology students at that, and then to generalize findings in such a way as to argue that empirical research indicates that no significant differences exist between ACOA and non-ACOA, notwithstanding the researchers claims to limitations on their studies, is, in my view, not an exercise in wisdom.

Notice Black's comments on when ACOA issues become apparent from her experience, as she writes, "It is about this time, when a young person reaches the mid-twenties that the effects of growing up in an alcoholic home begin to be apparent. These now adult children of alcoholics begin to experience a loneliness which doesn't make

130. Mary O Vail, Howard Protinsky, and Anne Prouty, "Sampling Issues in Research on Adult Children of Alcoholics: Adolescence and Beyond," *Adolescence* 35, no. 137 (Spring 2000): 115.

131. *Ibid.*, 116.

sense to them.”¹³² Black’s understanding of when the issues begin to manifest would not be during one’s college years but after graduation and entrance into one’s career, marriage and family choices.

Indeed, as I reflect upon my own pilgrimage, it wasn’t until my thirties and forties, after I had married, become settled in my field, and had children that I became fully aware of issues related to being raised in a home where alcohol was abused. In other words, for someone like myself, a family hero, I was too busy “succeeding” to see that I had any deep underlying issues to face.

College students, for the most part, are leaving home for the first time and acclimating to a new place and time in their life, struggling to find an identity that is independent of mom and dad and siblings. To suggest that results determined primarily from this group adequately express the effects of growing up in a home where alcohol was abused just doesn’t make sense, a point that is implied in Wilson’s research, as well, since she required all subjects for her research to be at least twenty-five years of age or older in order “to allow time for them to develop the personal and interpersonal problems considered characteristic of adult children of alcoholics.”¹³³ In addition, those adult children of alcoholics who really did have trouble growing up in a chaotic home may not be those individuals who were able to handle college anyway and so did not attend in the first place, while those who did make it to college were probably those who had acquired high end coping skills and greater resiliency, all factors which could have further skewed the results.¹³⁴

132. Black, 32.

133. Wilson, “Evangelical Christian Adult Children of Alcoholics,” 266.

134. Susan Kashubeck and Sue A. Christensen, “Differences in Distress Among Adult Children of Alcoholics,” *Journal of Counseling Psychology* 39, no. 3 (July 1992): 356.

That being said, however, the methodological issues alone cannot adequately explain the source of all the inconsistencies. A second explanation needs to be considered, one that perhaps can best be explained by the familiar model of the pendulum. Often when a new idea, cause or movement is inaugurated, it generates excitement and energy. Over time, those who subscribe to it have a tendency to make claims that exaggerate its merits beyond the reality. This usually leads to a swing in the pendulum in the other direction, against the idea, cause or movement. Over time, again, claims are made by those who oppose the concept that go beyond what the facts allow. Ultimately, a new dynamic or equilibrium is discovered that brings both sides together. In a sense, it is the classic thesis, antithesis, synthesis. It is just such a synthesis or equilibrium that developed as the movement progressed which provides a second factor in explaining the inconsistencies.

It was postulated by the early pioneers that simply being a child of an alcoholic meant that you had experienced or would suffer trauma as a result and this would carry through into adulthood. The quotation by Black mentioned in chapter one is indicative of this idea and is, therefore, repeated here, “The bottom line is: ALL CHILDREN RAISED IN ALCOHOLIC HOMES NEED TO BE ADDRESSED. ALL CHILDREN ARE AFFECTED” [emphasis original].¹³⁵ The adult child of an alcoholic was considered part of a homogenous group. If you were such a child, then you had the symptoms. If you didn’t acknowledge any symptoms, then you were assumed to be in denial.

Of course there are times when this is the case and the individual really is in denial. Susan Balis, in an article she authored, *Illusion and Reality: Issues in the*

135. Black, 27.

Treatment of Adult Children of Alcoholics, points this out when she shares from her experience:

When I led groups for children of recovering substance abusers, I found that with few exceptions they were bright, articulate and exceptionally appealing children. I wanted to believe that these children had escaped the devastating impact of their parents' alcoholism. And the children tried to reassure me that they had, by their behavior and by their fervently expressed determination to do differently from their parents.¹³⁶

For the remainder of the article, however, Balis illustrates and explains the underlying brokenness that existed beneath these children's reassurances as it relates to perception, maturity, endurance, responsibility, and silence.¹³⁷

However, while granting denial is the case sometimes, perhaps often, it is not the case always and therein lies the problem. If you believe that a person is in denial, how can that person convince you otherwise? It sets up a circular reasoning pattern that cannot be disputed, but it must be challenged because the reasoning is flawed as the research that was being conducted began to reveal.

Robert J. Ackerman, one of the founding board members of the National Association for Children of Alcoholics, was one of the first to conclude, based upon his extensive study of over one thousand adults, that not all adult children of alcoholics have been affected in the same way, even if they lived in the same household. His now classic quote, "It is perhaps ironic that I have met so many adult children of alcoholics whose brothers and sisters are not adult children of alcoholics!"¹³⁸ is repeatedly mentioned in the literature.

136. Susan A. Balis, "Illusion and Reality: Issues in the Treatment of Adult Children of Alcoholics, *Alcoholism Treatment Quarterly* 3, no. 4 (Winter 1986): 67-68.

137. *Ibid.*, 69-91.

138. Robert J. Ackerman, *Same House, Different Homes: Why Adult Children of Alcoholics Are Not All The Same* (Pompano Beach, FL: Health Communications, 1987), 2.

According to the results of his research, 78.2% of the respondents perceived their lives to be highly affected by parental alcoholism; 11.1% were only moderately affected; and 10.7% did not perceive their lives as being affected at all.¹³⁹ He came to the conclusion that there are mitigating factors which affect how parental alcoholism affects children and delineates them as follows:

Some of these variables may include the degree of alcoholism experienced, the type and kind of alcoholic in the family, the child's perception of the experience, the child's resilience to stress, the gender of the alcoholic and the child, the age at which the adult child was exposed to alcoholism, any positive offsetting factors while growing up, and any cultural considerations and implications.¹⁴⁰

What Ackerman, in effect, asserts from his research is that, contrary to the original hypothesis in the clinical movement, the ACOA group is not monolithic or homogenous but a heterogeneous group where each child is unique and there is a spectrum of responses possible depending upon numerous variables. Some children collapse under the weight of their circumstances while others have greater resiliency and navigate through the landmines well.

The possibility of resiliency is supported by another study, this one conducted by Coombes and Anderson, that draws on the case histories of six social workers who grew up in homes where alcohol was abused. In spite of their difficult experiences, each revealed or developed a marvelous resiliency that enabled them to overcome and become a functional, empathic and successful social worker. Indeed, it was their family circumstances and overcoming of difficult experiences that provided them with a number of important tools that allowed them to succeed with their clients.¹⁴¹

139. Ibid., 20.

140. Ibid., 2.

141. Kara Coombes and Ruth Anderson, "The Impact of Family of Origin on Social Workers From Alcoholic Families," *Clinical Social Work Journal* 28, no. 3 (Fall 2000), 281-302.

Other writers and researches also confirm the fact that mitigating factors can lessen the blow of growing up with an alcoholic parent. Brown,¹⁴² Easley and Epstein,¹⁴³ Goodman,¹⁴⁴ and Werner and Johnson¹⁴⁵ are just a few examples of writers in the field that support the idea of a heterogeneous group capable of numerous responses on a spectrum due to multiple variables. Werner and Johnson, as just one example, point out how critical the nonalcoholic parent is in providing support and stability to the child along with other caring adults in his or her life as a counterweight to the alcoholic parent.¹⁴⁶

After battling for many years, it appears that both the clinical and empirical fields in the movement have come to an understanding and a general respect of the other branch. It is not an either/or proposition but both/and. Each branch has something to contribute and, together, they provide a complementary and more complete view of the issues related to growing up as a child of an alcoholic.

Literature Regarding ACOA Pastors

Interestingly, though, in spite of the abundance of sources available regarding ACOAs (including many helpful articles and books written for pastors to assist members of their congregations who were raised in alcoholic homes),¹⁴⁷ there is a dearth of material covering the topic of pastors who, themselves, are adult children of alcoholics.

142. Brown, 5.

143. Margaret J. Easley and Norman Epstein, "Coping With Stress in a Family with an Alcoholic Parent," *Family Relations* 40, no. 2 (April 1991): 218,223.

144. Ronald W. Goodman, "Adult Children of Alcoholics," *Journal of Counseling and Development* 66, no 4 (December 1987): 162-163.

145. Emmy E Werner and Jeanette L. Johnson, "The Role of Caring Adults in the Lives of Children of Alcoholics," *Substance Use & Misuse* 39, no 5 (April 2004): 699-720.

146. *Ibid.*, 707-708.

147. Wilson, *Counseling Adult Children*; Stephen P. Apthorp, *Alcohol and Substance Abuse: A Clergy Handbook* (Wilton, Connecticut: Morehouse-Barlow Co. Inc., 1985); Callahan and McDonnell; Sell, 20-23. These are just several examples of many.

Studies on this critical group of pastors who have influence with so many people on a weekly basis are virtually nonexistent. Only a few brief articles appear in the literature here and there and even fewer books.

A “testimonial” article given by Sam Norman in *Journal of Pastoral Care* provides us with a glimpse into his journey of self-realization as an adult child and the difficulty he had in breaking free of denial in an article simply entitled, “Adult Children of Alcoholics: A Self Portrait.”¹⁴⁸ A more pointed discussion of the topic appears in *Christian Century*, in an article written by Stephen Apthorp, former associate rector of Christ the King Episcopal Church in Tucson, Arizona, in which he asks the poignant question, “Are the Blind Leading the Blind?”¹⁴⁹

Apthorp poses this question based on the fact that in numerous regional training seminars he has conducted for clergy and lay leaders, 80% of clergy present had come from families affected by substance abuse and that, for many, “this history was a determining factor in the decision to enter the ministry . . .”¹⁵⁰ It should not be surprising, then, to hear Apthorp’s observations that, in his seminars, “most clergy and lay leaders are hero types, oriented more toward task and achievement than toward care and compassion.”¹⁵¹ In his article, he also goes on to confirm a point previously made in this thesis when he writes:

[P]eople who grew up in dysfunctional families attract and are drawn to others who grew up in such families. Therefore, impaired pastors often collect impaired parishioners. No wonder that the church at large, and the clergy in particular,

148. Norman, 77-80.

149. Stephen P. Apthorp, “Drug Abuse and the Church: Are the Blind Leading the Blind?” *Christian Century* 105, no. 33 (November 9, 1988): 1010.

150. Ibid.

151. Ibid., 1012.

have difficulty recognizing and dealing with today's epidemic affliction of addiction. The church and its leaders are clearly among the afflicted, if not the addicted.¹⁵²

The remainder of Aphthorp's article focuses on how the church can become a redemptive place for the broken where God's healing is able to come instead of a place where dysfunction is multiplied.¹⁵³

Another author that tackles the issue of the unhealthy church is Don Williams.¹⁵⁴ Although not written from a strictly adult child of an alcoholic perspective, the book, *Jesus and Addiction: A Prescription to Transform the Dysfunctional Church and Recover Authentic Christianity*, nevertheless, does address many of the same issues of dysfunction raised in the adult child literature like addiction and codependency.

For instance, Williams notes in his introduction that his book "is [emphasis original] for and about pastors and laypeople who share responsibility for making the church a part of the addictive system rather than God's intended instrument for redemptive recovery."¹⁵⁵ He goes on to add, "[W]e meet our own addictive needs by meeting the needs of others. As a result, we serve the Church for ourselves. This is the hidden sickness of codependency. . . . Addicted and codependent leaders build churches that become extensions of their own sickness and function as addictive organizations."¹⁵⁶

By way of sharing his personal story, Williams guides pastors through a process of discovery of their own addictions and how only through God's grace can we become truly functional human beings as Jesus was and then function as the healthy fellowship

152. Ibid.

153. Tragically, Aphthorp did not follow his own advice. He allegedly had a history of abusing alcohol and was recently sentenced to twelve years in prison for repeatedly raping his stepdaughter. Sadly, because his inner life did not match his outer ministry, he was added to the list of casualties of war.

154. Don Williams, *Jesus and Addiction: A Prescription to Transform the Dysfunctional Church and Recover Authentic Christianity* (San Diego, CA: Recovery Publications, Inc., 1993).

155. Ibid., 2.

156. Ibid., 17.

God intended.¹⁵⁷ Williams' work is a much fuller development of the issues of codependency and dysfunction that were raised in the previously mentioned articles by Rebeck and Aldridge.

One study that was conducted on adult children of alcoholics in ministry was by Mel Howell, senior associate pastor at First Evangelical Free Church of Fullerton, California.¹⁵⁸ *Evangelical Missions Quarterly* featured an article by Howell that summarized research he had completed for his PhD dissertation on missionaries who had grown up in alcoholic homes.

In his survey, approximately 14% of the missionaries identified themselves as adult children of alcoholics.¹⁵⁹ When these individuals were asked to rate their identification with Woititz's thirteen characteristics, they identified with all of them more than the non-ACA missionaries but only marginally so.¹⁶⁰

According to Howell, "My findings suggest that while family-of-origin issues are not disqualifiers for missionary service, they should not be ignored either."¹⁶¹ He adds, "[L]istening to numerous missionaries with ACA backgrounds has convinced me that living the formative years of childhood in an unhealthy home leaves its scars even on those who have experienced the love of God."¹⁶² However, he is also quick to point out a key consideration when he writes:

People who have been lifted out of brokenness often have the greatest sense of appreciation for God's care and a passionate desire to let others know the good news. These missionaries from alcoholic and other dysfunctional backgrounds

157. Ibid., 191-192.

158. Mel Howell, "Adult Children of Alcoholics as Missionaries," *Evangelical Missions Quarterly* 36, no 1 (January 2000): 64-69.

159. Ibid., 64.

160. Ibid., 65-66.

161. Ibid., 69.

162. Ibid.

are increasingly in the trenches of cross-cultural ministry, carrying on the work that has been done by redeemed brethren for two millennia.¹⁶³

The only book that I did find that specifically and intentionally focuses on the issue of pastors in ministry who are the children of alcoholics is the book by Sean Sammon, *Alcoholism's Children: AcoA's in Priesthood and Religious Life*.¹⁶⁴ It, however, is a brief work of only five chapters that repeats much of what was found in the clinical literature, including information on the disease of alcoholism, family systems theory, dysfunctional family rules, Woititz's ACOA characteristics, family roles and the healing process advocated by Gravitz and Bowden in working through the six stages of recovery. To be fair, Sammon, himself, in his introduction admits that his book "does not exhaust discussion about alcoholism or its children; rather it tells briefly the story of a potentially fatal disease that affects millions of Americans and their families."¹⁶⁵

He does, however, contribute to the discussion by taking insights in the clinical world and applying them in the context of pastors in ministry. According to Sammon, of the four family roles proposed by Wegscheider, the two found most often in ministry are the hero and the lost child. The two remaining roles, rebel and mascot, are seen less often in the ministry.¹⁶⁶

It is easy to see why heroes would be drawn to the ministry. Indeed, as was already pointed out in chapter one in a quotation from Sammon's book, "Priesthood and religious life have often attracted heroes. These life choices emphasized perfection,

163. Ibid.

164. Sean Sammon, *Alcoholism's Children: AcoAs in Priesthood and Religious Life* (New York: Alba House, 1989).

165. Ibid., xii.

166. Ibid., 45-46.

control, self-discipline, and disregard of personal needs. Both provided members with a ready-made identity, and the opportunity to take care of others.”¹⁶⁷

As for the lost child being the other family role drawn into the ministry, Sammon astutely notes:

Many forgotten children in Church service spent their growing up years praying for a miracle: that somehow God would put a stop to their parent’s drinking. When these prayers went unanswered, they looked to religious life and priesthood for a place of security and the opportunity to make up for what was lacking in life and family.¹⁶⁸

Sadly, however, without healing, they will never fill the void, for as Sammon tragically notes, “[W]ithout a capacity for mature intimacy, the spirituality of these men and women will become little more than an escape.”¹⁶⁹

Literature and the Five Characteristics

A perusal of the bibliography reveals a number of sources connected to the five characteristics under consideration in this thesis (conflict avoidance, people pleasing, perfectionism, empathy and sensitivity). Given the length of this literature review already, and the fact that a number of these sources have already been referenced in chapters one, two and/or above, combined with the fact that the primary focus of this chapter was purposely on the overall literature surrounding adult children of alcoholics, a briefer consideration will be given in reviewing the literature regarding these five characteristics.

In the area of conflict avoidance, one of the most helpful and eye-opening resources was the book by Cosgrove and Hatfield, already referenced in chapter two, and

167. Ibid., 50.

168. Ibid.

169. Ibid.

its thesis regarding conflict in the church.¹⁷⁰ The authors' use of family systems theory to understand church conflict was a refreshingly new approach and very enlightening as was their solution for mapping boundaries and communication patterns in the church in order to develop healthy strategies for modifying the family system.¹⁷¹ To the degree that a pastor is willing to examine the patterns in his or her family of origin and to address any wounded areas, to that degree the church under his or her care will be able to move towards healthy relationships. It is all part of the systems theory. When one part becomes healthier, the rest of the parts must respond to the change.

One interesting side note which illustrates Cosgrove and Hatfield's premise comes from an experience at the church where I pastor. In their book, they argue that family systems that are not healthy have family rules that allow troublemakers to be tolerated as an unconscious symptom or problem that is resident in the group.¹⁷² These individuals are fulfilling a necessary role to keep the unhealthy family balanced. This explains why many times pastors have difficulty in dealing with troublemakers in the church. They are unknowingly needed.

When I was pastoring with unhealthy conflict avoidance tendencies, we regularly had people rise on a cyclical basis and produce trouble. It seemed as if I would take care of one crisis and then another would pop up. Amazingly, as I began to heal from my tendencies towards conflict avoidance, a remarkable change began to develop in the family dynamics and atmosphere of the church body. Dysfunctional patterns that were previously practiced or tolerated started to diminish and healthier patterns began to

170. Charles H. Cosgrove and Dennis D. Hatfield, *Church Conflict: The Hidden Systems Behind the Fights* (Nashville: Abingdon, 1994).

171. Ibid., 104-122.

172. Ibid., 94-95.

develop throughout the body. Eventually, those who were causing trouble in the congregation, but did not want to change, left the church. Their role was no longer needed to balance out an unbalanced and unhealthy system, just as Cosgrove and Hatfield predicted.

When we move to the area of people pleasing or codependency and examine the empirical literature, we discover a study done by Harvey Irwin where he investigated the possible link between childhood trauma (e.g. living in a home with an alcoholic parent), narcissism and codependency. Contrary to the findings of the clinical field, Irwin's research led him to question the idea of a link between childhood trauma and the development of codependency.¹⁷³ In fact, he concluded by stating, "[U]ntil a sound empirical base is established any extensive reliance upon the concept of codependence for psychotherapeutic purposes should be considered with caution."¹⁷⁴

While the empirical research was still being conducted and its results argued, the clinical branch in the field continued to march forward with its popular books and articles. The standard bearer in the field who is quoted again and again in the literature is Melody Beattie.¹⁷⁵ Her book, *Codependent No More: How to Stop Controlling Others and Start Caring for Yourself*, may not have been the first to discuss codependency but it certainly became one of the most famous. The book was on the *New York Times* best-sellers' list for three years and has sold over four million copies.¹⁷⁶ Writing from her own experience as a recovering codependent (she was also a recovering substance abuser and

173. Harvey J. Irwin, "Codependence, Narcissism and Childhood Trauma," *Journal of Clinical Psychology* 51, no. 5 (Sept 1995): 658-665.

174. *Ibid.*, 664.

175. Melody Beattie, *Codependent No More: How to Stop Controlling Others and Start Caring for Yourself* (New York: Harper San Francisco, 1992).

176. Cynthia Orange, "After 20 years, Beattie's *Codependent No More* still reaches out to families of alcoholics and addicts," Hazelden Voice, Hazelden Foundation, http://www.hazelden.org/web/public/vc_beattie20yrs.page [accessed January 31, 2008].

a mother of two when she separated from her active alcoholic husband), she touched a chord in millions of people who saw themselves in her description of the craziness involved with being codependent and the sanity that can come when we choose to recover.

Wegscheider-Cruse addresses the topic of codependency in her book, too, as do Cermak, Friel and Friel, and Bradshaw in their writings.¹⁷⁷ Cermak, in fact, has sought to have codependency defined both as a personality trait and a psychiatrically recognized personality disorder.¹⁷⁸

Both Berry and Taylor and Edward Welch deal with codependency, as well, but they do so from a Christian perspective.¹⁷⁹ Welch, for example, sees codependency as rooted in the fear of man and the only solution, what he calls “radical treatment,” is the fear of the Lord.¹⁸⁰ Unfortunately, the tone with which he writes seems less Christian than the solutions he offers. He speaks disparagingly of Beattie’s work and considers her answers to be “atrocious solutions.”¹⁸¹ Of Bradshaw, he has nothing good to say either and considers his teachings to be “fruits of a pluralistic, you-do-your-thing-and-I-do-mine culture.”¹⁸² Even Christian counselor, Larry Crabb, does not escape Welch’s ire as Welch criticizes Crabb’s psychological needs theory.¹⁸³

177. Wegscheider-Cruse, 1-32; Cermak, *A Primer on Adult Children*, 17-29; Friel and Friel, 155-165; John Bradshaw, *Bradshaw On: the Family – a Revolutionary Way of Self-Discovery* (Pompano Beach, FL: Health Communications, Inc., 1998), 165-181.

178. Timmen Cermak, *Diagnosing and Treating Co-dependence* (Center City, MN: Hazelden, 1986), 9-35.

179. Carmen Renee Berry and Mark Lloyd Taylor, *Loving Yourself as Your Neighbor: A Recovery Guide for Christians Escaping Burnout and Codependency* (San Francisco: Harper & Row, 1990); Edward Welch, *When People Are Big and God is Small: Overcoming Peer Pressure, Codependency, and the Fear of Man* (Phillipsburg, NJ: P&R Publishing Company 1997).

180. Welch, 19.

181. *Ibid.*, 48.

182. *Ibid.*, 78.

183. *Ibid.*, 145.

In Welch's view, psychological needs only became expressed after Adam's fall. While there are a number of points in Welch's book that are grounded in Scripture, overall, he seems to have a truncated spirituality of either/or. From Welch's perspective, a person is either walking in sin by walking in the fear of man or a person is living rightly in the fear of God. There seems to be no place for addressing emotional trauma or empathizing with hurting people, etc. Sadly, his reductionistic spirituality seems to prevent him from seeing any benefits from the codependent movement.

Walter Jackson's piece, in *Review and Expositor*, provides a much healthier and balanced approach to the issue of codependency.¹⁸⁴ He does not deny the many truths that have been discovered within the codependency movement, including psychological insights, but nor does he soften the clear truths of Scripture either. Instead, he integrates them in a way that invites the gospel of Jesus Christ to become what he calls a "Christian Ingredient for Recovery."¹⁸⁵

This same thought is echoed by Amy Carr and Daniel Buchanan in a soundly reasoned and balanced article they wrote for *Journal of Pastoral Care*.¹⁸⁶ In their article, they conclude, "We have suggested that ministry-minded persons neither avoid codependency as irrelevant to a faith-based identity nor adopt codependency language without question. Instead, pastors should engage in a theological reframing and pastoral assessment of the contemporary discourse on codependency."¹⁸⁷

184. Walter C. Jackson, "Codependence and Christian Faith: An Introduction to Compassion Addiction," *Review and Expositor* 91, no. 1 (1994): 31-41.

185. *Ibid.*, 91.

186. Amy Carr and Daniel Buchanan, "A Theological Analysis of Codependency Theories," *Journal of Pastoral Care* 51, no. 3 (Fall 1997): 303-314.

187. *Ibid.*, 314.

Perfectionism, the third characteristic under consideration in this thesis, has certainly come into its own as a study or discipline over the past ten to fifteen years. Of the five characteristics under consideration, it has, perhaps, the most extensive empirical research available.

Edward Chang explored the link between perfectionism and stress, as well as the way psychological outcomes (whether positive or negative) are influenced by perfectionism.¹⁸⁸ Flett and Hewitt, leading researchers in the field, have conducted numerous studies on perfectionism, several of which are included in the bibliography. One study focuses on the link between “psychological distress and the frequency of perfectionistic thinking,” while another focuses on perfectionism’s link to psychopathology. A third study explores the use of a scale they and their colleagues created known as the Multidimensional Perfectionism Scale.¹⁸⁹

It is Flett and Hewitt’s assertion that perfectionism is multidimensional rather than one-dimensional and consists of both social and personal components. They identify three components: self-oriented perfectionism (the perfectionist’s standards come from within as he or she expects perfection of himself or herself), other-oriented perfectionism (the perfectionist expects a standard of perfectionism in those around him or her), and, socially prescribed perfectionism (the perfectionist believes others outside of himself or

188. Edward Chang, “Perfectionism as a Predictor of Positive and Negative Psychological Outcomes: Examining a Mediation Model in Younger and Older Adults,” *Journal of Counseling Psychology* 47, no. 1 (January 2000): 18-26.

189. Gordon L. Flett et al., “Psychological Distress and the Frequency of Perfectionistic Thinking,” *Journal of Personality and Social Psychology* 75, no. 5 (November 1998): 1363-1381; Paul L. Hewitt and Gordon L. Flett, “Perfectionism in the Self and Social Contexts: Conceptualization, Assessment, and Association With Psychopathology,” *Journal of Personality and Social Psychology* 60, no. 3 (March 1991): 456-470; Paul L. Hewitt et al., “The Multidimensional Perfectionism Scale: Reliability, Validity, and Psychometric Properties in Psychiatric Samples,” *A Journal of Consulting and Clinical Psychology* 3, no. 3 (1991): 464-468.

herself have expectations of perfection for the perfectionist).¹⁹⁰ On the basis of these three dimensions, they developed their instrument as a means of evaluating dimensions and levels of perfectionism.¹⁹¹

Robert Frost and his colleagues also describe perfectionism as multidimensional but, in their work, they postulate different dimensions than do Hewitt and Flett, although there is some overlapping. In Frost's construct, perfectionism consists of six dimensions: concern over making mistakes, high personal standards, the perception of high parental expectations, the perception that one's parents were overly critical, the doubting of the quality of one's actions, and the tendency or predilection to be orderly or organized.¹⁹²

Frost, like Hewitt and Flett, developed a scale to measure levels of perfection, and he too called it, "The Multidimensional Perfectionism Scale." Although he used the same nomenclature, his scale was designed to measure levels of perfectionism in each of the six dimensions he postulated as well as to provide an overall perfectionism score (the sum of the subscales of all dimensions with the exception of organization).¹⁹³

Two articles focusing on perfectionism and its effect on religious practice appear in the bibliography as well. The first article, by Ben Sorotzkin, examines issues connected to "understanding and treating perfectionism in religious adolescents."¹⁹⁴ Sorotzkin spends much time focusing on the role of parenting in the development of

190. Hewitt and Flett, "Perfectionism in the Self," 456-457.

191. Ibid., 456-470.

192. Randy O. Frost et al., "The Dimensions of Perfectionism," *Cognitive Therapy & Research* 14, no. 5 (October 1990): 449-468.

193. Ibid.

194. Ben Sorotzkin, "Understanding and Treating Perfectionism in Religious Adolescents," *Psychotherapy: Theory, Research, Practice, Training* 35, no. 1 (Spring 1998): 87.

perfectionism and the difficulty, in particular, that religious perfectionists have in facing and addressing their unhealthy perfectionism.¹⁹⁵

A second study, conducted by Ronald Rickner and Siang-Yang Tan, both of Fuller Theological Seminary, focuses on protestant clergy with the goal of determining whether a link might exist between psychopathology, guilt, perfectionism, and family of origin functioning.¹⁹⁶ Contrary to clinical assertions, Rickner and Tan's results indicated "no significant differences between groups [i.e. clergy, public high school teachers and Christian high school teachers] on psychopathology or perfectionism" even though the clergy perceived their family of origins as less healthy than the other two groups.¹⁹⁷

Richard Walters provides a comprehensive and Christian approach to tackling perfectionism in his book, *Escape the Trap: Help for Perfectionists and Those Who Live With Them*.¹⁹⁸ In this very enjoyable and readable book, Walters shares from his own experience and work the difference between perfection and excellence, the source of perfectionism including distorted beliefs, and God's solution on escaping the trap by changing our actions, thoughts and where we gain our sense of identity. He also includes a humorous but helpful chapter on how to live with a perfectionist.

Some discussion appears in the literature regarding the nature of perfectionism as to whether it is a positive or negative quality or a mixture of both. To use the language of the empiricists, the question is whether perfectionism is adaptive or maladaptive. Based

195. Ibid., 87-93.

196. Ronald G. Rickner and Siang-Yang Tan, "Psychopathology, Guilt, Perfectionism, and Family of Origin Functioning Among Protestant Clergy," *Journal of Psychology and Theology* 22, no. 1 (1994): 29-38.

197. Ibid., 29.

198. Richard Walters, *Escape the Trap: Help for Perfectionists and Those Who Live With Them* (Grand Rapids, MI: Zondervan, 1989).

on his research, Hewitt finds nothing adaptive about perfectionism,¹⁹⁹ neither does noted Christian author and pastor, David Seamands.²⁰⁰ Indeed, in Seamands' opinion, "Perfectionism is the most disturbing emotional problem among evangelical Christians. It walks into my office more often than any other single Christian hang-up."²⁰¹

On the other hand, the research of Grzegorek et al., Hawkins, Watt and Sinclair, as well as that of Rice and Mirzadeh, lead them to assert the existence of adaptive perfectionism as well as maladaptive perfectionism.²⁰² All three studies, at least in part, base their conclusions on the usage of part of Frost's Multidimensional Perfection Scale. High scores on the personal standards scale, when combined only with high scores on the organization scale, seemed to support an adaptive type of perfectionism. When individuals, however, had high scores on the personal standards scale, parental expectations and parental criticism scales, along with high scores on the concern for mistakes and doubting one's actions scales, it was indicative of maladaptive or unhealthy perfectionism.²⁰³

In light of the confusion over adaptive versus maladaptive perfectionism, it is possible that the question may, in part, be one of semantics. What is called adaptive perfectionism by some appears to be what others might simply consider the pursuit of

199. Etienne Benson, "The Many Faces of Perfection," *Monitor on Psychology* 34, no. 10 (November 2003), <http://www.apa.org/monitor/nov03/manyfaces.html> [accessed January 31, 2008].

200. David Seamands, "Perfectionism: Fraught with Fruits of SELF-Destruction," *Christianity Today*, April 10, 1981, 24-26.

201. *Ibid.*, 24.

202. Jennifer L. Grzegorek et al., "Self-Criticism, Dependency, Self-Esteem, and Grade Point Average Satisfaction Among Clusters of Perfectionists and Nonperfectionists," *Journal of Counseling Psychology* 51, no. 2 (April 2004): 192-200; Colleen C. Hawkins, Helen M.G. Watt, and Kenneth E. Sinclair. "Psychometric Properties of the Frost Multidimensional Perfectionism Scale with Australian Adolescent Girls: Clarification of Multidimensionality and Perfectionist Typology," *Educational and Psychological Measurement* 66, no. 6 (December 2006): 1001-1022; Kenneth G. Rice and Saied A. Mirzadeh, "Perfectionism, Attachment, and Adjustment," *Journal of Counseling Psychology* 47, no. 2 (April 2000): 238-250.

203. Grzegorek et al., 1015-1018.

excellence, a point made by Richard Winter, in his book, *Perfecting Ourselves to Death The Pursuit of Excellence and the Perils of Perfectionism*.²⁰⁴

In commenting on his childhood experience, he writes, “In my own family there is strong influence of what I consider to be healthy perfectionism, shown in the value that is placed on hard work, high standards, punctuality, cleanliness, tidiness, moral integrity and maintaining good relationships.”²⁰⁵ For Winter, as well as for a number of the other authors quoted above, in contrast to Hewitt and Flett, the pursuit of excellence is the same as adaptive perfectionism, just by another name.

Less research and writing has been done in the field of empathy than on perfectionism or codependency, or even conflict avoidance, although there is some good solid material in the field. Albert Mehrabian, now Professor Emeritus of Psychology, UCLA, has done extensive work in the area of emotional empathy. Two of his studies in this field are included in the bibliography.²⁰⁶ In his article, “Emotional Empathy and Associated Individual Differences,” he does an admirable job in reviewing the literature/studies on empathy. Mehrabian also provides a helpful understanding of the contrast between intellectual empathy, what he calls “cognitive role taking” (the ability mentally to step into someone else’s world) with emotional empathy, what he calls a “vicarious emotional response” (the ability to emotionally step into someone else’s world and then both feel and respond with the emotions of the other).²⁰⁷ Mehrabian is also the

204. Richard Winter, *Perfecting Ourselves to Death: The Pursuit of Excellence and the Perils of Perfectionism* (Downers Grove, IL: InterVarsity Press, 2005), 30.

205. *Ibid.*, 12.

206. Albert Mehrabian, “Relations Among Personality Scales of Aggression, Violence, and Empathy: Validation Evidence Bearing on the risk of Eruptive Violence Scale,” *Aggressive Behavior* 23, no.6 (1997): 433-445; Albert Mehrabian, Andrew L. Young, and Sharon Sato, “Emotional Empathy and Associated Individual Differences,” *Current Psychology: Research & Reviews* 7, no. 3 (Fall 1988): 221-240.

207. Mehrabian, Young and Sato, 221.

author of the “Balanced Emotional Empathy Test” (BEES), a test that measures an individual’s capacity to experience vicariously the emotions of others.²⁰⁸

That empathy is essential in ministry, particularly for those pastors who are engaged in caring and counseling people, is powerfully made clear by Charles Shelton in an article he wrote for *Chicago Studies*. In his opinion, empathy is the psychological foundation for pastoral ministry and an essential ministerial tool.²⁰⁹

Although not written from the Christian perspective, Gary Hartley’s article on the role of counselor understanding in client change also emphasizes the importance of empathy in the counseling process.²¹⁰ In fact, he notes, “The concept of empathic understanding is as central to counseling as the clinical therapy hour itself.”²¹¹

Beyond the books already mentioned in chapter one that refer to the heightened capacity for sensitivity to body language and nonverbal cues by those who were raised in homes where alcohol was abused, I did not pursue much research in the area of sensitivity. I did, however, explore the field for possible testing materials to utilize for my semi-structured interviews. The project design, in chapter four, elaborates on two instruments that were the fruit of this exploration.

Summary of the Literature Review

This chapter’s literature review focused primarily on the literature regarding adult children of alcoholics in both the clinical and empirical arenas where much has been written over the past twenty-five years. We discovered how original insights of the

208. A. Mehrabian, *Manual for the Balanced Emotional Empathy Scale (BEES)* (Available from Albert Mehrabian, 1130 Alta Mesa Road, Monterey, CA 93940).

209. Charles Shelton, “Christian Empathy: The Psychological Foundation for Pastoral Ministry,” *Chicago Studies* 23, no. 2 (1984): 209-222.

210. Gary D. Hartley, “Empathy in the Counseling Process: The Role of Counselor Understanding in Client Change,” *Journal of Humanistic Education & Development* 34, no. 1 (September 1995): 13-23.

211. *Ibid.*, 21.

clinical movement have been combined with insights gained through research from the empirical fields producing a synthesis that leads us to conclude that adult children of alcoholics are more complex than originally believed (i.e. the group is more heterogeneous than homogeneous), that additional factors besides alcohol can and often do play a role in affecting children negatively, that many adult children have been impacted negatively by the alcoholic home, that mitigating factors can lessen the blow and that many adult children of alcoholics are able to overcome and turn the weaknesses and negative consequences into a positive and productive outcome.

We also discovered that, with the exception of the few works cited in this chapter, not much else has been written about pastors who were raised in homes where alcohol was abused and very little research has been conducted on this critical group. In light of how many people pastors influence on a regular basis, it is certainly a field deserving of greater study and investigation.

Chapter 4

Project Design

In order to test the thesis that there are common characteristics (*both positive and negative*) of adult children of alcoholics that impact pastoral leadership, a pool of ACOA pastors is required. Since I am an ordained minister with the Assemblies of God and have been part of the New York District of the Assemblies of God for twenty-five years, it was only natural to look to this group.

With the help of Dr. Bryan Auday, Chairman of the Psychology Department at Gordon College in Wenham, MA, I developed an initial screening instrument (See Appendix B on pp. 170-171). On the instrument, there was a request for contact information (e.g. name, address, phone number and e-mail address) and initial demographic data (e.g., date of birth, level of ministerial credential, date credentialed, place of ministry and number of years in present ministry position). This demographic data would allow me to confirm that the potential participant was indeed a licensed or ordained minister with the Assemblies of God, was of sufficient age, and had been in ministry long enough for any potential patterns of dysfunction related to an alcoholic family to have manifested.

Following the request for demographic data, an initial question was asked: Did either of your parents drink alcohol of any kind? If the respondent checked no, they were simply asked to return the form in the preaddressed envelope. If the credential holder checked yes, then they were asked to answer an additional thirty questions corresponding to those found in the “Children of Alcoholics Screening Test” or CAST.²¹²

212. J.W. Jones, *The Children of Alcoholics Screening Test and Test Manual* (Chicago: Camelot

The CAST is a self-report questionnaire consisting of thirty yes or no items that was developed by J.W. Jones in 1983 to evaluate the feelings, behavior and experiences of the respondent regarding the drinking habits of his or her parent(s). The cutoff score for identifying children of alcoholics is six or higher. The higher the total score, the more a family has been affected by alcoholism. Scoring two to five is an indicator of parental problem drinking while answering either zero or one in the affirmative indicates no problem in the home with alcohol issues.

Over the years, research has confirmed both the reliability and the validity of the CAST instrument in identifying grown-up children raised in homes with at least one alcoholic parent.²¹³ I felt that such a reliable test was necessary for this project because there are times an adult child of an alcoholic may deny their parent(s) was an alcoholic without some strong evidence otherwise.

For example, in a research study investigating the link between adjustment issues and adult children of alcoholics, CAST scores indicated 87 of the 315 participants came from alcoholic homes. On additional self-report measures that were also conducted at the same time, however, seven of the 87 denied that alcohol abuse problems were present in their homes even though they had scores of six or higher on the CAST.²¹⁴

Limited, 1983).

213. J.W. Jones, "The Children of Alcoholics Screening Test: A Validity Study," *Bulletin of the Society of Psychologists in Addictive Behaviors* 2 (1983): 155-163; Helene Charland and Gilles Cote, "The Children of Alcoholics Screening Test (CAST): Test-Retest Reliability and Concordance Validity," *Journal of Clinical Psychology* 54, no. 7 (November 1998): 995-1003; Suzanne H. Lease and Barbara J. Yanico, "Evidence of Validity for the Children of Alcoholics Screening Test," *Measurement and Evaluation in Counseling and Development* 27 (1995): 200-210; Douglas Staley and Nady El-guebaly, "Psychometric Evaluation of the Children of Alcoholics Screening Test (CAST) in a Psychiatric Sample," *International Journal of the Addictions* 26, no. 6 (1991): 657-668.

214. Cathy W. Hall, Larry M. Bolen, and Raymond E. Webster, "Adjustment Issues with Adult Children of Alcoholics," *Journal of Clinical Psychology* 50, no. 5 (September 1994): 786-792.

When I took the CAST several years ago, my score was in excess of the cut-off of six and, yet, if I had been part of the above study when I was a collegian I would have been the eighth to deny parental alcoholism. It has only been over the past five to ten years that I have honestly appraised how severe my father's drinking was when I was a child.

The final question on the screening instrument asked the respondents whether they would be interested in participating in the second phase of the study if they were to meet the criteria for the research project. They were then instructed to return the completed form within two weeks.

With the support of my district superintendent, Dr. Duane Durst, the screening instrument and a cover letter (along with a preaddressed stamped envelope) were mailed out from our district office to every credential holder in the New York District in the superintendent's Communiqué, along with his note of support. A copy of the cover letter is attached as Appendix C, p. 172.

The cover letter informed the credential holder of the project and the main thesis, provided some brief instruction, requested their participation, assured them of their confidentiality and also let them know that an online version of the survey was available through a link on our church's website if they preferred to complete the survey that way instead. The online version included a set of instructions to guide the credential holder through the survey completion process. Approximately a month after the mailing, follow-up calls were made to the pastors to confirm they had received the survey and to request that they complete and return the screening instrument as soon as possible if they had not already done so.

Phase two of the project consisted of a face-to-face two-part semi-structured interview with each participant who had scored at least six on the CAST and who also indicated they were interested in participating in the second phase. The first part of the interview consisted of questions that were developed, based upon the literature and with the assistance of Dr. Auday, to probe more deeply into the experience, perception, memories and feelings of these pastors, as well as to gain more demographic information for comparison purposes. Part one of the interview is included in Appendix D (pp.173-179).

The first few questions were intended to put the credential holder at ease by focusing on their spiritual pilgrimage rather than just jumping into questions about their alcoholic parent(s). I asked them to share briefly how they came to know Christ, how he had changed their life and when and how they sensed God's call to ministry. Their answers would allow me to get to know them better as well as to explore initially whether their coming to Christ or going into ministry was in any way connected to being the child of an alcoholic.

From there, we shifted to some demographic questions regarding birth order, family makeup, type of student, and level of education. Part of my research, as mentioned earlier, indicated that mitigating factors may affect the impact of growing up with parental alcoholism. Here and in several other places throughout the interview, I wanted to explore some of these factors.

I then asked the respondent to read four paragraphs that reflect the four roles postulated by Wegscheider-Cruse (i.e. hero, scapegoat, lost child and mascot) and to indicate the one that most closely describes how they remember themselves as a child.

They were also given the option of indicating none of the above. I was curious as to whether these pastors fit the clinical model of role-taking as a way of dealing with the disruptive home because of alcohol.

This question was followed by inquiries regarding the presence of emotional support outside the home and involvement with activities outside the home, both mitigating factors. I also inquired as to whether these outside activities, if they were involved in them, were helpful or not in coping with their parent's problem drinking.

By this point of the interview, I was ready to begin intentionally moving towards alcohol-related questioning and I did so, first, with a positive focus by asking the interviewee what personal strengths they thought they had because they grew up in their particular family. In case their experience was a very negative one, I wanted to ease them into the discussion slowly by examining their strengths first.

We then moved to issues related to alcohol usage in the home. I inquired as to who the problem drinker was, how frequently did he or she (or both) drink, how old was the credential holder when his or her parent(s) began drinking, whether they ever stopped and, if so, when. I also asked how their parent(s) acted when he or she drank versus when they didn't. Each of these questions was an attempt to determine what kind of alcoholic the parent(s) was since this has been shown to mitigate or intensify the effect of the alcohol usage on the child of an alcoholic.

A key question that followed these questions targeted the ways the child reacted to the parent(s) when he or she was drinking. In particular, I wanted to understand what they felt and what they did in response to their parent's drinking.

The next three questions centered on the role of family traditions in the home and what effect or interference the parent's drinking may have had with these traditions.

According to the literature, one of the key determinants of whether alcohol usage in the home has a detrimental effect on the children is the degree by which holiday celebrations and traditions are disrupted by the parent's drinking.²¹⁵

Following these questions, I asked two open-ended questions that were central to the thesis. The first question, "In what ways did growing up in a home with a problem-drinking parent prepare you for the ministry in which you currently serve?" was intended to explore any positive characteristics that might be found in these ACOA pastors as well as to examine whether their particular ministry burden and/or involvement was in any way connected to their parent's drinking. The second question, "Please list any area in which you believe your life or ministry has been hindered by growing up in a home where alcohol was abused," shifts the focus to any negative characteristics that might be present. Both questions are critical to gaining insight into how these pastors view the effects of growing up in a home where alcohol was abused.

Following these two questions, time was taken to concentrate on relationships in the interviewee's family of origin. In this set of questions, we explored the levels of closeness felt towards each parent, the way conflict was dealt with in the home, the nature of the relationship between the parents, whether a divorce occurred and, if so, how it was handled.

The next set of questions picked up on four of the characteristics under consideration in the thesis: empathy, perfectionism, sensitivity and conflict in the

215. Judith S. Seixas and Geraldine Youcha, *Children of Alcoholism: A Survivor's Manual* (New York: Harper & Row, 1985), 131-145.

ministry. With regard to empathy and sensitivity, I was particularly interested in exploring whether others would confirm these qualities in the credential holders and the questions reflect this. In relation to conflict in ministry, I was exploring any link in the way they currently deal with conflict in light of how it was handled in their families of origin.

Part one of the semi-structured interview concluded with two final questions. The first question inquired whether the interviewee had ever sought out or received professional help (e.g. counseling, ACOA groups, Al-Anon, etc.) for any issues related to their parent's drinking. The answer is important for a couple of reasons. First, I wanted to see if the issues had risen to the point where he or she felt that intervention of some sort had been necessary. Second, I wanted to know if the respondent had gained information from such help in a way that may have skewed some of the answers.

The second question which concluded the interview was a "catch-all" question that gave the credential holder an option to make any other comments regarding their experience that were not covered by the questions asked thus far. In a sense, it was an opportunity for them to reflect on everything we had covered to that point and to give a summary statement of how growing up in an alcoholic home had impacted their lives and their ministries.

The second part of the interview consisted of eight questionnaires/inventories, each utilizing Likert scales or multiple choice options. Every inventory included a set of instructions for that particular instrument.

The first questionnaire utilized was Peter Scazzero's "Inventory of Spiritual/Emotional Maturity."²¹⁶ Used with his permission, this 47-item self-report diagnostic tool provides a brief scale that assesses the respondent's spiritual maturity level, as well as six more scales to evaluate the respondent's emotional maturity level. These six scales are based upon the six principles he presents in his book, *The Emotionally Healthy Church* (i.e. look beneath the surface, break the power of the past, live in brokenness and vulnerability, receive the gift of limits, embrace grieving and loss, and make incarnation your model for loving well.) A four-point Likert scale (not very true to very true) is utilized for each question. Scazzero provides a graph to plot the scores once they are totaled and an interpretation guide that assists in understanding where the scores fall in relation to four emotional levels: emotional infant, emotional children, emotional adolescents, and emotional adults.²¹⁷

Given the fact that many children of alcoholics carry emotional scars into adulthood, I thought this scale would be helpful as an overall assessment tool in determining in which of the six areas those wounds are found. Scazzero does not provide any evidence for empirical validation of this assessment tool in his book so the results do have to be interpreted tentatively. Nonetheless, by comparing the results from one pastor to another, certain patterns may become apparent and could provide tentative support either for or against my thesis. Of particular interest to me were Scazzero's scales in his inventory on limits and on loss. I suspected that these two areas would probably be the ones that evidenced the most wounding and would, therefore, need the most healing.

216. Peter Scazzero with Warren Bird, *The Emotionally Healthy Church: A Strategy For Discipleship That Actually Changes Lives* (Grand Rapids, MI: Zondervan, 2003), 59-65.

217. Ibid., 66. Scazzero's interpretation guide is provided in Appendix E, p. 180.

The second questionnaire, also used with permission, was the “Children’s Role Inventory,” or CRI, developed initially by Ann Potter.²¹⁸ This 60-item self-report instrument utilizes a 5-point Likert scale (strongly disagree or very unlike me to strongly agree or very like me) to assess the roles of children in alcoholic families. Respondents are asked to describe how they remember themselves as children on a variety of traits (listed in alphabetical order) that reflect the roles of hero, scapegoat, lost child and mascot. This inventory has been shown in the literature to be both valid and reliable.²¹⁹ The CRI was utilized to assess the role identification of each of the pastors to determine if, as the literature suggests, more heroes enter the ministry than any other role.

The third inventory, developed by Albert Mehrabian, is the “Balanced Emotional Empathy Scale,” or BEES.²²⁰ This scale is a 30-item self-report instrument with respondents reporting the degree of their agreement or disagreement to each statement based upon a 9-point Likert scale (very strong agreement to very strong disagreement). Mehrabian provides norms and interpretation guidelines in his manual which allow scores to be compared across the population to assess the respondent’s level of emotional empathy. In the manual, he also provides support for the validity and reliability of this inventory.²²¹ Since one of the characteristics under consideration is empathy, this inventory will be helpful in determining whether pastors who are adult children of alcoholics have a higher than normal level of emotional empathy.

218. Ann Elizabeth Potter, "Construct and Predictive Validity of a Children's Role Inventory for Studying Adult Children of Alcoholics" (PhD diss., University of Nebraska, 1988), 89.

219. Ibid.; Dale E. Williams and Ann E. Potter, "Factor Structure and Factorial Replication of the Children’s Role Inventory," *Educational and Psychological Measurement* 54, no. 2 (Summer 1994): 417-427; Ann E. Potter and Dale E. Williams, "Development of a Measure Examining Children's Roles in Alcoholic Families," *Journal of Studies on Alcohol* 52, no. 1 (1991): 70-77.

220. Albert Mehrabian, *Manual for the Balanced Emotional Empathy Scale* (BEES), 2000. (Available from Albert Mehrabian, 1130 Alta Mesa Road, Monterey, CA 93940). Used with permission.

221. Ibid., 3-5.

One of the most difficult characteristics to test of the five characteristics under consideration in this thesis was sensitivity. A promising test I discovered in the literature is the “Contextual and Affective Sensitivity Test” developed by Antonietta Trimboli and Michael Walker.²²² The author’s assertion is that, in spite of a number of tests that claim to measure sensitivity to various aspects of the communication process, “each can be criticized on methodological and conceptual grounds.”²²³ In order to improve on these previous attempts, the authors utilized genuine rather than posed messages in their test, contextualized messages rather than an independent communication, and “camouflaged rather than transparent” messages so as to avoid test bias.²²⁴

Although I would have preferred to use Trimboli and Walker’s instrument for the project, the logistics made it impossible and I chose instead to use another measure known as the “Reading the Mind in the Eyes Test.”²²⁵ In this test, the participant is presented with a series of 36 photographs of the eye-region of the face and is asked to choose which of four words best describes what the person in the photograph is thinking or feeling. According to the authors, “This test was conceived of as a test of how well the participant can put themselves into the mind of the other person, and ‘tune in’ to their mental state.”²²⁶ The main limitation of this instrument, however, is that the message, if you will, is posed and static, rather than spontaneous and contextual. Nonetheless, it is the best instrument I found available that was useful for my project.

222. Antonietta Trimboli and Michael Walker, “The Cast Test of Nonverbal Sensitivity,” *Journal of Language and Social Psychology* 12, nos. 1-2 (March 1993): 49-65.

223. *Ibid.*, 49.

224. *Ibid.*

225. Simon Baron-Cohen et al., “The ‘Reading the Mind in the Eyes’ Test Revised Version: A Study with Normal Adults, and Adults with Asperger Syndrome or High-functioning Autism,” *Journal of Child Psychology and Psychiatry* 42, no. 2 (2001): 241-251.

226. *Ibid.*, 241.

The fifth instrument utilized in this project was the “Multidimensional Perfectionism Scale,” or MPS, developed by Frost et al.²²⁷ This 35-item self-report inventory, previously described in chapter 3, utilizes a 5-point Likert scale, and will be helpful in evaluating the level of perfectionism, both adaptive and maladaptive, in the respondents.

With regard to the sixth instrument, a choice was made to use the “Thomas-Kilmann Conflict Mode Instrument.”²²⁸ According to the authors, “In conflict situations, we can describe a person’s behavior along two basic dimensions: **(1) assertiveness**, the extent to which the individual attempts to satisfy his or her own concerns, and **(2) cooperativeness**, the extent to which the individual attempts to satisfy the other person’s concerns” [emphasis original].²²⁹ They further note that these two dimensions of behavior can be used to define five basic ways of dealing with conflict, which they delineate as competing (forcing), collaborating (problem solving), compromising (sharing), avoiding (withdrawing) and accommodating (smoothing).²³⁰

Based upon this construct, they designed an instrument that contains 30 pairs of statements describing possible behavioral responses. The respondent chooses one of the pairs that best characterizes their behavior. The answers are then scored and graphed in relation to the two dimensions, as well as compared to provided norms in the five conflict-handling modes. If, as I suspect, conflict avoidance is found in pastors who are adult children of alcoholics, then there should be a higher number of scores in the

227. I contacted Dr. Frost and he e-mailed me the Multidimensional Perfectionism Scale for use with this project. The scale describes how to score the six subscales as well as the overall perfectionism scale. It also includes resources supporting both its reliability and validity. I am appreciative of his willingness to share this resource with me.

228. Kenneth W. Thomas and Ralph H. Kilmann, *Thomas-Kilmann Conflict Mode Instrument* (Mountain View, CA: Xicom, Incorporated, 2007).

229. *Ibid.*, 7.

230. *Ibid.*, 6-8.

avoiding and accommodating categories, the two modes that are lowest on the assertiveness scale.

When I shared the nature of my thesis with Mehrabian and requested permission to utilize his “Balanced Emotional Empathy Test,” he made available to me his “Sensitivity to Rejection Scale” as well, believing that it would fit nicely into my study.²³¹ It is a 24-item self-report instrument with respondents reporting the degree of their agreement or disagreement based upon a 9-point Likert scale (very strong agreement to very strong disagreement). Since people pleasing is one of the characteristics under consideration, this seventh scale could provide some indirect evidence of this attribute in the pastors participating in phase two.

The eighth and final scale utilized in testing my thesis is Hewitt and Flett’s “Multidimensional Perfectionism Scale.”²³² Even though I am using Frost’s scale by the same name, Hewitt and Flett’s scale addresses different, albeit overlapping, dimensions of perfectionism, as was previously mentioned in chapter 3. It is a 45-item self-report instrument utilizing a 7-point Likert scale and will help in assessing whether the pastors are self-oriented, other-oriented or socially prescribed perfectionists and to what degree.

Before we began each interview, a number of introductory matters were performed. I first confirmed that the contact and initial demographic information they provided on the initial screening instrument was correct. Then, each participant was asked to sign a consent form.

231. Albert Mehrabian, *Manual for the Sensitivity to Rejection Scale (MSR)*, 1994. (Available from Albert Mehrabian, 1130 Alta Mesa Road, Monterey, CA 93940). Used with permission.

232. Paul L. Hewitt and Gordon L. Flett, *Multidimensional Perfectionism Scale (MPS)* (North Tonawanda, NY: Multi-Health Systems, Inc., 2004).

This form described the purpose of the research, any potential risks or discomforts that could occur as well as potential benefits. The form also informed everyone that their participation was voluntary and the results would be confidential. Finally, they were given the phone number to my thesis advisor, Dr. Ken Swetland, in case they had any concerns or questions about the study. A duplicate of the consent form was provided to each participant after they signed the form. A copy of the form is included as Appendix F, p. 181.

I also requested permission of each participant to record the session to assure accuracy of information and, finally, I read an introductory statement that reminded the credential holder of the purpose of the project, provided information on confidentiality and reviewed the structure of the interview

With the information gained in part one of the semi-structured interviews, combined with the scores from these eight scales, it was hoped that a picture would develop as to whether this group of pastors, who are adult children of alcoholics, share both positive and negative characteristics in common. The results of the research are presented and discussed in chapter five.

Chapter 5

Outcomes

Initial Findings and Demographic Results

Since the project was divided into two phases, the initial screening phase and, then, the semi-structured interviews that followed, this review of the outcomes will be in two parts as well. We begin first with the findings of phase one.

The original screening instrument was mailed out to 661 individuals. A valid response was received from 205 credential holders, a solid return rate of 31%. Of these, 44 had Children of Alcoholics Screening Test (CAST) scores of at least two or higher, indicating a problem drinker in the home. As mentioned previously in chapter four, a score of six or higher on the CAST indicates a child of an alcoholic. This conservative score of six was used as the criterion for this present study.

Based on this criterion, there were 34 individuals who met the cutoff of six, which is equivalent to 16.6% of those who responded. According to Sher, “reasonable estimates suggest that at least 10 percent of the population can be considered to be ‘children of alcoholics’.”²³³ That the percentage for this project is higher than Sher’s is not at all unexpected since, as was previously mentioned in chapter one, it is not uncommon for the helping professions to draw a higher proportion of people from ACOA backgrounds.

Of these 34 individuals, 28 initially expressed a willingness to participate in the second phase of the project, with 26 actually taking part. Nineteen of these participants were male (73%) and seven were female (27%). Time, health, and/or an unwillingness

233. Kenneth J. Sher, *Children of Alcoholics: A Critical Appraisal of Theory and Research* (Chicago: University of Chicago Press, 1991), 14.

to open up old wounds were the reasons given by three of the eight pastors who chose not to take part.

CAST scores for the 26 people who participated in the second phase of the project ranged from six to 23 with an average score of 16. Only three individuals scored under 10. Thirteen respondents had scores between 10 and 19 and an astonishing ten (38%) had a score of twenty or higher, indicating severe alcoholism in the home.

Two other criteria were also included in this project as a way of assuring that sufficient time and life experience in ministry had occurred so as to allow for any unhealthy patterns that might develop to become apparent. Pastors had to be 30 years of age or older and be in ministry for at least five years. Both conditions were met by all 26 participants.

The average age of the interviewees was 51.7 years, with a spread from 30 years of age to 81. Three respondents were in their thirties, ten were in their forties, seven in their fifties, three in their sixties, two in their seventies and one individual was 81. The least amount of ministry experience was six years, while the two oldest individuals have served for over 50 years. The average ministry experience was just under 22 years.

Ten of the participants were senior pastors. One was a youth pastor, one was a staff pastor and another was an assistant pastor. Three of the credential holders were missionaries and one was a music pastor. Four were involved in other ministries, either within the church or without, while three were in transition between ministries. Two of the 26 were retired from active full-time ministry.

In light of the sensitivity of the subject in general, combined with the importance of body language in communication as it relates to this subject in particular, I

intentionally chose to do face-to-face interviews rather than rely on an impersonal packet of materials or on a phone interview where nonverbal cues are lost. I wanted to observe firsthand the reactions, facial expressions and body language as the questions were asked and answered, believing that this would provide a fuller, albeit subjective, picture of how growing up with an alcoholic parent can affect a person.

Twenty-one of the interviews were conducted throughout the state of New York in the pastor's home, church, office or other mutually agreed upon location. An additional five interviews were with credential holders who had moved out of state, necessitating my traveling to three other states in the South and Midwest.

Each interview was originally intended to last approximately 45 minutes to an hour. Every interview actually lasted at least 90 minutes with some continuing up to three hours. This was due to two factors. First of all, the two-part semi-structured interview with the questions in part one and the eight scales in part two was long and requested a lot of information. Not only was I seeking demographic information and exploring the five characteristics under consideration in this thesis, I also wanted to gain an understanding of how potentially mitigating factors may have affected the results in case the thesis was not supported. It added up to a very long instrument and an unrealistic expectation regarding the time frame.

Secondly, and this was somewhat expected, the questions themselves opened up a well within most of the credential holders. More often than not, it was as if a dam burst when they began to share their stories with me. Several wept openly. Others paused to ponder questions they had never considered before. It was a powerful experience to witness and the ensuing discussion extended the interview as well.

This, of course, produced a dilemma. How does one summarize over 50 hours of recording and 208 total scales completed? It would extend this thesis far beyond what is reasonable to transcribe every interview and include the complete myriad of data accumulated. Nonetheless, an attempt needs to be made to describe, discuss and draw conclusions from the research in a way that is clear, concise, insightful and accurate. We shall begin by painting a statistical portrait of the alcoholic homes in which these pastors were raised. From there, we will explore a number of the variables suggested by Ackerman²³⁴ that can either mitigate or intensify the effect of growing up in such a home and how these variables affected the results in this study. This, then, will lead us to a consideration of how these 26 ministers handled the situation, what specific mechanisms they employed to survive the inconsistent and sometimes chaotic atmosphere in which they were raised. With this foundation laid, we will then be able to move on to examine the general long-term effects of growing up with an alcoholic parent both positively (personal and ministry strengths gained) and negatively (personal and ministry hindrances suffered, including arrested emotional development) as well as the specific effects in the five characteristics under consideration (conflict avoidance, people pleasing, perfectionism, empathy and sensitivity).

Statistical Portrait of the Pastors' Alcoholic Homes

In this study, the alcoholic parent in 20 of the 26 homes was the father (77%). In only one home was the mother the alcoholic (1 of 26 - 4%). These figures differ from those of Ackerman's national study where he noted 60% of the adult children had an

234. Robert J. Ackerman, *Same House, Different Homes: Why Adult Children of Alcoholics Are Not All The Same* (Pompano Beach, FL: Health Communications, 1987), 2.

alcoholic father and 20% grew up with an alcoholic mother.²³⁵ Both Ackerman's study (20%) and this study (5 of 26 -19%) indicate approximately one in five ACOA grew up in homes where both parents were alcoholics.²³⁶

Where dad was the only alcoholic, in over half the cases (11 out of 20), he drank on a daily basis. In another 35% of the homes, the father drank either weekly or several times a week. In only 10% of the cases was dad a binge drinker. In the situation where the mother only was the alcoholic, she drank on a daily basis. When both parents drank (and in one case, a stepfather drank as well), they did so weekly (4 of the 9 parents), several times a week (1 of 9), or daily (4 of 9), with the frequency of two additional parents unknown to the respective credential holder.

In 69% of the cases (22 out of 32), the interviewee reported parental alcohol usage began either probably or definitely before they were born. In five cases, pastors reported the drinking began when they were children (age 5, 6, 10[both parents], and 13 respectively). In the other five cases, it is unknown when the drinking began.

In nine of the 26 families (35%), the parents' marriage ended in divorce, with seven of these divorces taking place while the child was still in the home. In seven of the nine marriages that ended in divorce, one or both of the parents remarried, with several of these new marriages also ending in divorce.

Twenty-three out of the 32 total alcoholic parents (i.e. taking into account families where both parents drank and a step-parent) stopped drinking at some point. Although, for the majority of the credential holders (53%), their parents did not stop drinking until they were out of the house; whereas for 19% of the interviewees the drinking ceased

235. Ibid., 26-28.

236. Ibid., 30.

while they were still in the home. Three parents stopped drinking temporarily (one for 10 years) but then returned to drinking. Seven additional parents never ceased and continue to do so even to this day.

Mitigating Variables And Their Effect

In chapter three, we noted from Ackerman's research that a number of variables can and do affect the way a child of an alcoholic is affected by the alcoholic parent (e.g. the gender of the alcoholic and of the child, the age of the child when the drinking begins and if it stops, the degree of alcoholism [mild to severe], the kind of alcoholic [how did he or she act when drinking as opposed to when not drinking], the perceptions of the child regarding the situation and the different stress responses children innately have, whether they have support or received help, et al. are all variables that can either mitigate or intensify the problems in the alcoholic home). One of the questions, then, to consider is in what ways did the presence of these variables impact the pastors in this study.

There are two complementary ways to answer this question. First of all, since the CAST scores can be used in a general way to provide a snapshot into the depth of alcohol issues in the home, we can compare the CAST scores against a number of these variables to assess their effect and draw some tentative conclusions. The higher the CAST score, the more likely correlated is that particular variable.

Once the comparison is made, we can then examine the pastor's own testimony regarding his or her perceptions of events. In this way, we can observe possible confirmations of the CAST with the variable and with the self-report in the semi-structured interview to get a fuller and more accurate picture of the effects of the variables.

We readily admit, of course, that this comparison and correlation is not based on rigorous scientific research with controls, etc. We are simply exploring possible patterns that may be evident in the data gleaned from the twenty-six initial screening instruments and the phase two semi-structured interviews. Further research with controls for variables would need to be implemented to confirm our conclusions empirically.²³⁷

One example of how variables can affect CAST scores focuses on the gender of the alcoholic and the gender of the child. From his research, Ackerman tentatively concluded, “[F]or sons of alcoholics, the greatest impact occurred when he had an alcoholic mother. Next was having two alcoholic parents, and the least impact on sons was that of having an alcoholic father.”²³⁸ When it comes to daughters of alcoholics, Ackerman points out that “having two alcoholic parents has the greatest impact, followed by having an alcoholic father” with the least impact being felt by daughters “having an alcoholic mother.”²³⁹

What does the data from this present study reveal? When the CAST scores are compared to the gender of the alcoholic parent and that of the child (See Appendix G, Table 1, on p. 182), we observe generally supportive results. There were no solo alcoholic mothers with sons so no comparison with Ackerman is possible on that point. The next greatest impact, according to Ackerman, is for sons having two alcoholic parents. We discover that two of the three highest male CAST scores belong to those with at least two alcoholic parents, confirming Ackerman’s tentative conclusion. The highest CAST score in Table 1, by the way, is for a male pastor with three alcoholic

237. See chapter six for a discussion on future studies in this regard.

238. Ackerman, 34.

239. Ibid.

parents, his biological parents and a stepfather. One can only imagine the difficulty that family dynamic would have on a child.

Contrary to Ackerman, though, another male pastor with two alcoholic parents scored much lower on the CAST than sons of solo alcoholic fathers, a reversal of what was initially expected. However, in the interview process, this pastor informed me that he was the youngest in his family and that by the time he came along, his mother had stopped drinking. In effect, he lived with only one alcoholic parent in the home, his father, thus offering a possible explanation for the apparent discrepancy and providing further confirmation of Ackerman's research.

Three out of the four highest female CAST scores were from daughters with alcoholic fathers, which agrees with Ackerman. However, one of the lowest CAST scores was for a daughter of two alcoholic parents, contrary to Ackerman, who believed that such an arrangement would be more disruptive to a child. The reversal in part may have been due to the interaction of several variables. First of all, the age at onset of parental drinking (age 10) may have lessened the impact of two drinking parents. Second, the severity of drinking as reported by the pastor was minimal. She noted that her parents drank weekly rather than daily, she considered them social drinkers only, and stated they became happy and jubilant when drinking rather than reclusive or abusive. These factors could also have mitigated the effect of having two alcoholic parents.

The second highest CAST score among female credential holders was for the daughter of an alcoholic mother, which according to Ackerman, ought to be the least disruptive. However, another variable noted by Ackerman which can lessen or intensify the effect of the alcoholic parent is the perception of the child regarding the situation.

The daughter reported that her mother began drinking when the daughter was about seven or eight and that she drank daily, most of the time at home. She also commented on how “embarrassing” it was to have an alcoholic mother, that it is “more acceptable for a man to be drunk.” She noted her mom would act “silly and foolish” when she was drinking and that it was “embarrassing.” The repeated use of the word, “embarrassing” during the interview is no doubt significant in understanding some of the perceptions this individual had towards the situation.

In addition, according to her testimony, she felt no “real emotional connection” with either her mother or father during her teen years. This is significant since, in many cases, the nonalcoholic spouse has the capacity to lessen the effect of the alcoholic spouse by providing adequate emotional support and nurture (as will be noted below under variable seven.) Her father, however, was more passive and would just not deal with the situation. All of these factors, and maybe others as well, might suggest why there was such a strong negative effect with having an alcoholic mother, contrary to Ackerman’s conclusion.

Two more variables are compared with CAST scores in Table 2 (See Appendix G, p. 183). First, when the CAST scores are compared to the variable of the child’s age when the parent(s) began drinking, the data seems to support the notion that when a parent begins drinking later in a child’s life, the impact will probably be less than if he or she had already developed strong drinking habits prior to the child’s birth.

The scores for pastors who were between five and seven when their parent began to drink are much higher than their counterparts whose parents did not begin drinking until they were 10 or 13. This would make sense since a child’s formative years would

probably be more severely affected by the change for the worse in family dynamics because of alcohol usage than those who had relatively stable homes up until just around adolescence and then the change occurred.

Also in Table 2, a secondary weaker comparison can be made between the CAST scores and another variable of whether the alcoholic parent stops drinking or not. When a parent does not stop, stops because of extenuating circumstances (e.g. illness), or, worse yet, begins drinking, stops and then returns to the alcohol, it apparently has negative consequences for the child. In nine out of 16 such cases (56%), the CAST scores are higher. This makes sense. The longer the drinking continues, the greater the probability it will have negative consequences on the family.

Particularly damaging to the family would be the case where the parent stops drinking and then returns to the bottle several years down the road. The hopeful interval of sobriety and peace would be replaced with a return to chaos and despair. What devastation that would wreak upon the family. No wonder in the three occasions where this occurred, the CAST score was high. One of these pastors commented on how “very discouraging” it was when her father went back to drinking. It affected the whole family. Another wept as he described the gruesome death his dad died as a result of alcoholism after his father returned to drinking.

Conversely, when a parent stops drinking completely and permanently and begins to walk out sobriety, the change to the family is usually positive and the effect of the alcoholic home diminishes. In 13 out of the 16 lowest CAST scores (81%), this was the case.

I know from my own family of origin that when my dad converted to Christ and stopped drinking, it was an “earthquake” event that brought change not only to my father but also to the whole family. Although it did not undo the damage done in my formative years, it did “stop the bleeding” so to speak and initiated a positive transformation process in my life.

When the data on CAST scores is compared to a fourth variable, the frequency of drinking, we observe another apparent pattern (see Appendix G, Table 3, on p. 184). For those who reported that an alcoholic parent drank daily, we observe that they had 10 out of the top 12 CAST scores (83%). Conversely, eight out of the lowest 12 CAST scores (67%) were from those parents who drank less frequently than daily. These results would seem to confirm the fairly self-evident fact that the more frequently the alcoholic drinks, the more severe the consequences probably are for the child of an alcoholic.

A fifth example of how a variable can affect the child of an alcoholic has to do with divorce (See Appendix G, Table 4, on p.185). When alcohol is being abused in a home, more often than not, tension is already present. Conflicts can erupt with yelling and screaming. Sometimes, even physical violence manifests itself as a result. Yet for most children, it is still home and symbolizes a type of security. When the disruption due to alcohol leads to a divorce between the parents, usually the effect of the disruption is magnified. Indeed, one of the pastors remarked that, for him, the divorce was an even greater problem than his father’s alcoholism itself.

In my own case, I remember many a night of my parents yelling, with doors slamming, worried that my dad would leave and not return and that the family would break up. It was a frightening time for me as a young child.

It would stand to reason, then, that when divorce is present in an alcoholic home, it will probably, more often than not, have a negative impact on a child. The CAST scores appear to confirm this as over half of the highest scores (7 of 13 - 54%) are from those pastors who reported that their parents' marriage ended in divorce or separation. In contrast, only three of the lowest 13 scores (23%) are from children of divorced families.

A sixth example of a comparison between CAST scores and a variable has to do with holiday celebrations and traditions (See Appendix G, Table 5, on p.185) As previously mentioned in chapter four, one of the key points in the literature is that to the degree that holiday traditions and celebrations are disrupted by alcohol, it magnifies the negative impact.²⁴⁰ In other words, if a family can "hold it together" so to speak, for a child's birthdays, Thanksgiving and Christmas celebrations, etc., then the effect of alcohol in the home is mitigated. Conversely, if a child's parent comes home drunk and forgets the child's birthday or disrupts a Christmas family celebration, the effects are far more devastating.

Three out of the four highest CAST scores were by those whose holiday and family celebrations were disrupted by alcohol. Pastor W remembers vividly how drinking was always at the center of every family get-together. There was never a time when these events did not include a keg of beer. Pastor X recalled how she hated holidays up until five years ago because of the negative experiences she had as a child. Her father would begin drinking around Thanksgiving and continue drinking daily until Easter and then, as if flipping a switch, stop drinking until the next holiday season. She added that she never remembers her dad being there when presents were opened for

240. Judith S. Seixas and Geraldine Youcha, *Children of Alcoholism: A Survivor's Manual* (New York: Harper & Row, 1985), 131-145.

Christmas because he was always drunk during that time. Pastor Z remarked that one of his earliest Thanksgiving Day memories is when his stepfather, in a drunken rage, threw the turkey through the front window and it rolled down the front lawn. No wonder these three pastors' CAST scores were so high.

Several other pastors whose CAST scores were high also recall painful memories related to family celebrations and holiday traditions. When Pastor S was asked what traditions and celebrations she experienced in her home, she gasped and declared, "NONE!" There were no birthday celebrations or family memories sitting around the table. She didn't know anything about holiday celebrations/traditions that other families had. She also noted that her father did not even come to her graduation. Another pastor remembers his father passing out at Christmas dinner from drunkenness. Still another remembers the intense fear he felt knowing dad would be driving drunk at extended family Christmas celebrations.

What I also found interesting is that several of the pastors could not remember their childhoods. They could not remember if the celebrations were marred or not. They have gaps in their memories, whole chunks of time they just can't remember because of the trauma experienced as children. How tragic.

A seventh variable has to do with support and nurture provided by the nonalcoholic spouse. According to Ackerman, when this offsetting factor is not present or strong, the child usually suffers more.²⁴¹ A comparison of the CAST scores with this variable appears to support Ackerman's conclusions (See Appendix G, Table 6, on p. 186). For those pastors with the highest CAST scores, in 4 out of 9 cases (44%), they

241. Ackerman, 45-47.

reported being just “somewhat close,” to “not close” to or “distant” from their non-drinking parent.

In contrast, in 8 out of 9 cases (89%) where pastors had the lowest CAST scores, they reported being “close” or “very close” to their non-drinking parent. Our study, therefore, seems to support the conclusion that when the non-drinking parent can fulfill the nurturing parenting role in spite of having an alcoholic parent in the home, it lessens the impact on the child.

An eighth key variable that can affect the child of an alcoholic deals with the kind of alcoholic the parent was when drinking (i.e. how did he or she act when drinking). Not every alcoholic responds the same way to alcohol. Some are nasty, abusive and mean while drinking, while others become jovial, carefree happy and/or goofy. Some alcoholics become passive, mellow, and quiet when they drink, while others become outgoing and loud. These differing responses naturally affect children in different ways.

The most detrimental actions of the alcoholic, according to Ackerman, were when the alcoholic exhibited offensive behavior (ranging from embarrassment to physical and/or sexual abuse) or verbally belligerent behavior (defined as name calling, yelling, being critical, etc.).²⁴² If this is the case, then we would expect the highest CAST scores to come from those who grew up in such alcoholic environments and that is what we find (See Appendix G, Table 7, on p. 187).

In eight out of the 10 highest CAST scores (80%), pastors reported they had at least one parent whose drinking style was either verbally belligerent or offensive, while in only five of the 10 lowest scores was this the case (50%). On the other hand, in four out of the 10 lowest cases (40%), the minister reported a parent’s drinking style to be

242. Ackerman, 7-10.

carefree as compared to only two out of the 10 highest CAST scores (20%) and in those two particular high CAST scores, even though they had a parent with a carefree style, the ministers had another alcoholic parent who was belligerent. It would, appear, therefore, that Ackerman's assertion that kind of drinking is a variable that can mitigate or intensify the effect of growing up with an alcoholic parent is supported by our research.

For many of these ministers, when they were asked to describe how their alcoholic parent(s) acted when drinking and how they felt about it at the time, it triggered painful memories. Their honest, emotional, and, at times, tragic stories shed light on why so many of their CAST scores were in the high ranges. Pastor F spoke about how his father would lock his mother out of the house in the cold or beat her. He even saw one time when his father was beating his mother's head against the floor. Pastor R shared how her father threw her across the room when he was drunk. Numerous pastors commented how their fathers would become verbally abusive, condescending, critical, and argumentative. Others related how their alcoholic parent would punch holes in the wall, throw furniture, or be looking for a fight when they drank. Still other pastors shared tragically how their dad would sexually abuse their siblings after drinking or have multiple affairs. Story after story rolled off their lips and I sat in stunned silence as I reflected on the "war zones" in which they were raised.

Of course, not every pastor had such a difficult experience. For some, it was more embarrassing than frightening. Pastor N remembered his father urinating in the vestibule of their home, adding it "marked me." Other pastors recalled their parents acting goofy or silly when they drank, becoming uncoordinated, stumbling and falling to the ground. Pastor E remembers his father falling asleep at the dinner table and then

falling out of his chair. Another minister remembered that his “dad would sit around in his underwear” when he was drunk. What an embarrassing circumstance for this child to have to endure.

On several occasions, the pastors remarked that their parents became “pathetic” when they drank, “wimps” who “personified weakness,” sitting and crying all the time with their head in their hands after they drank. Pastor S, in fact, actually wished that her father had beaten her because then he would have expressed some form of “aliveness.”

What made it particularly difficult for many of the pastors is the change of behavior that would occur when their parent drank. Pastor K stated that her dad became “like a different person” or “like an alter ego.” Pastor H agreed the same was true for his father too, remarking, “It was a big contrast.” Many of the ministers had wonderful things to say about the alcoholic parent when he or she was not drinking. The parent was “great,” “sharp as a tack,” “lot of fun,” “more calm,” “easy going, dependable, quiet and a good guy,” “good sense of humor,” “fine,” “terrific guy when not drinking,” “very nice lady,” and “consistent, dependable and pretty pleasant.” Sadly, in a few cases, a few of the pastors confessed that they had never seen their parent in a sober state to know whether there was a change of behavior.

On the other hand, some of the ministers commented on the fact that their alcoholic parent actually became “more quiet, non-verbal,” “very serious, quiet and anxious,” “afraid of a lot of things,” and “distracted.” One can only imagine the confusion produced by dramatic transformations in their parent’s behavior after drinking.

It is obvious that, in many of the homes, the alcoholism resulted in incredible chaos and confusion and produced a wide range of emotions and reactions in the children

at the time. The comments from the ministers during the interview process are illustrative and provide a window into the ways that growing up in a home with an alcoholic parent affected them.

Many of the pastors acknowledged a sense of powerlessness or resignation over the situation when they were children. “There’s nothing I could do,” “I wanted to run but felt trapped,” “it was too much for a kid to have to deal with,” and “I was desperate over the situation” are statements indicative of the lack of self-efficacy these ministers felt.

Pastor M relayed the shocking story of how his mother attempted to remove herself and children out of the miserable situation by attempting to kill herself and the kids through carbon monoxide poisoning when her alcoholic husband left the home. He returned home early, however, and ended up saving his family.

Intense feelings of anxiety were another common emotion, expressed in such statements as “I had fear in the pit of my stomach,” “I was always having to be careful of talking too loud or laughing too loud,” “felt insecure,” “felt tense knowing there was going to be a problem,” and “felt like walking on eggshells.” Pastor F related that, so great was the anxiety and trauma in his home, his brother would wet his pants when his dad would just look at him. Others were anxious, wondering “what it would be like” when the alcoholic parent came home, hoping that their father or mother “would not be drunk,” and “knowing that if dad wasn’t home by six, it meant he was drinking.” Pastor Y commented on how he felt such a “fear of tomorrow” as a child, wondering “if we’ll have to move again,” and understandably so, since he had ended up attending 24 different schools by the time he was 18 years of age and had moved 40 times during that time period because of his father’s alcoholism.

Along with anxiety, there were also feelings of anger that these pastors remembered feeling. Statements like, “I grew up with such anger and felt a lot of fear,” “I felt angry,” “I hated it,” “I can’t tell you how much I hated it,” and “I hated him and didn’t want to be close to him” all reveal the depth of rage that resulted from the painful situation.

Embarrassment was another common reaction according to these pastors. “I was so ashamed of him,” “I wanted to shrink and die,” “embarrassed when my friends were over,” “bothered me,” “very humiliating and embarrassed,” and “disgust” are just a few of the comments that capture the sense of embarrassment felt by these ministers when they were children.

At the same time, many of the pastors also felt sorry for their alcoholic parent as expressed in statements such as, “I cried a lot for them,” “I felt sorry for my dad,” and “I felt bad for my mom.” The inability of these parents to function as parents led many of the ministers to fill the vacuum. As Pastor T put it, “I became the parent in response to my mom’s drinking.”

These conflicted feelings obviously led to a sense of disorientation within the child. This is noticeable in statements they made such as, “I felt a lot of confusion,” “wasn’t in touch with my feelings,” “I didn’t know what to do,” and “I felt a little confused.”

Some of the pastors found it was safer to avoid the alcoholic parent when he or she had been drinking. “I pulled within myself,” “I reclused [*sic*] myself,” “I tried to avoid him,” “I tried to stay out of his way,” “I withdrew,” “I just tried to melt into the

background around my father,” or “I became quiet and passive” are all indicators of the pastors’ attempts to avoid a scene.

Others were more closely connected to the alcoholic, although not always by choice. Several pastors mentioned being “raised in bars.” Pastor K commented that her father would take her and her younger sister with him to the bar and have them stay out in the car while he was drinking, which could go on for a while. Afterwards, he would drive them home drunk. Pastor W remembered his alcoholic father saying thousands of times, “Just one more drink and then we’ll go home.” One pastor, just to have “dad time” occasionally, would go with his dad to the bar and have a soda and play games while his dad drank.

A few of the pastors remember having to go to the bars to get their dad and bring him home after he was hammered. Some of the pastors also recounted how their alcoholic parent tried to get them to drink when they were children and teens. Several of them actually followed in their parent’s footsteps with drinking for a time as they got older until they experienced salvation in Christ and turned away from alcohol.

Other feelings and reactions were mentioned during the interviews too. A few of the pastors expressed a “horrible sense of shame,” of “blaming myself” for the situation, wondering what “had I done wrong.” There were also feelings of rejection, abandonment, neglect that were expressed during the interviews as having been experienced as children. Pastor W remarked painfully that “alcohol was more important than the kids,” while another minister remembered “spending lots of times alone.” This aloneness was evidenced by more than one minister when he or she remembered sadly

that no one was there to see their games, cheer their accomplishments or challenge them to strive in life.

For some, it was too great a trauma and they simply blocked out the memories. Several of the ministers commented about “hiding feelings,” “having a lot of suppression,” of “pushing it out of my mind,” or stating, “I can’t remember,” “I don’t know,” “I’m not sure,” or “I have no recollection.”

Amazingly, for a few of the pastors, the crazy situation seemed normal at the time. Indeed, their statements reflect this when they remark, “It was just the way it was,” “I never thought it was wrong,” “I never thought of him as an alcoholic,” or “No one ever talked about it.” One pastor summed up well the feelings of many when he said “It’s what life was. You didn’t question it.”

Coping Mechanisms

So, how did these ministers make it through such trauma, confusion, pain and chaos? As described in chapters one and three, adopting one of the four roles (hero, scapegoat, lost child and mascot), is one way of attempting to adapt to the situation and bring some kind of equilibrium to a family out of balance. Inventory #2 (Children’s Role Inventory) provided a scale that tested the affiliation each minister had with the four roles and the results are quite revealing (See Appendix G, Table 8 on p. 187).²⁴³

Twelve ministers identified primarily with the hero role and one with both the hero role and mascot role equally. Nine more identified with the mascot role, while four identified with the lost child role. None of the pastors identified with the scapegoat role.

243. Ann Elizabeth Potter, "Construct and Predictive Validity of a Children's Role Inventory for Studying Adult Children of Alcoholics" (PhD diss., University of Nebraska, 1988), 89.

This means that 46% of the pastors in the sample (12 of 26) identify exclusively or, at least, partly with the hero role.

This result is not surprising and confirms what was previously noted in chapters one and three that “[p]riesthood and religious life have often attracted heroes.”²⁴⁴ Wilson, as already noted in chapter one, agrees when she states, “Clergypersons are apt to be Responsible Ones/Heroes if they were raised in alcoholic families.”²⁴⁵ By the way, six of these hero children are also either firstborn or only children, while another four self-identified heroes were de facto oldest because of age differences among siblings or the large numbers of siblings where the roles began repeating due to “sets of children” (four pastors reported seven siblings or more in their families). Again, these results are not surprising since many firstborns often carry the weight of responsibility in the alcoholic home and have to grow up faster. If siblings follow, they usually have to be responsible for them as well. It is only natural that they would gravitate to the helping professions, like the ministry. They were already doing it to some degree in their family, so, it’s not totally unexpected if they end up being drawn in that direction.

This, of course, in no way diminishes the sense of call from God to vocational ministry. For these hero children, and, indeed, for all the ministers in this sample, their call came sovereignly from God, of this each is sure and shared during the interview of when and how it occurred.

For most, the call came relatively soon after their conversion to Christ. Some fought it for years before yielding, while others made immediate steps to prepare to fulfill

244. Sean Sammon, *Alcoholism’s Children: AcoAs in Priesthood and Religious Life* (New York: Alba House, 1989), 54.

245. Sandra D. Wilson, *Counseling Adult Children of Alcoholics*, Volume 21 of *Resources for Christian Counseling*, ed. Gary R. Collins (Dallas, TX: Word Publishing, Inc., 1989), 82.

the call. For some, it was a clear call from the beginning (e.g. missions). For others, it was less clear, just a sense they were called by Almighty God to preach the gospel.

Pastor C remarked, and he probably speaks for all the pastors, “It chose me. I didn’t choose it.” Pastor M humorously recalled, “The Holy Spirit mugged me.”

It was only in retrospect that many of these pastors could see the pattern of how their ministry call in part flowed out of their experience as children. One such hero noted that his theology was affected by his experience and that, because of what he experienced, he developed a “sense of responsibility for church and for ministry” as well as “a drive to accomplish things for God.” He added that he has compassion for “half the congregation that is dysfunctional,” that he “likes to help people,” and wants to “lift up the underdog.” Another hero commented that her childhood experience gave her “a desire to help people.” She adds, “There is so much hurt out there. It drives me to help.” She concludes it’s the reason that “I probably went into counseling.” A third hero informed me of his job/ministry with inmates who are in drug and alcohol rehabilitation, a field that he is familiar with because of the understanding he gained from his experience. A fourth hero has also worked in the prison system for some time, straight talking to inmates, acknowledging that his bold and confrontational style is a direct result of the alcoholic home in which he was raised.

In Table 8, we also note that nine out of the 26 pastors identified with the mascot role, or almost 35%, whereas, only five ministers identified exclusively with the lost child role (19%). This is contrary to Sammon’s assertions that it is the hero and lost child roles

that show up most frequently in the ministry with the scapegoat and mascot roles being found less often.²⁴⁶

Why this would be the case in our sample is unclear. It is possible that it is due to the nature of the Assemblies of God movement of which these pastors are a part. As a Pentecostal church, we have traditionally emphasized a more emotional form of worship and ministry. Such ministry may draw the more active and emotional mascot role to our ranks in numbers greater than those of other denominations whose worship and ministry are more staid. I know when speaking to the mascot adult children of alcoholics in this sample, I found most of them to be engaging, humorous, gregarious, at times frenetic, warm, and a pleasure to speak with. The upbeat nature of their personalities fit well in most of the Assemblies of God churches I have attended.

What may draw the mascot role to our churches could also be what diminishes the number of pastors in our movement who identify with the lost child role. Several of those ministers who identified with this role seemed more reserved, even sad, during the interview, like they are carrying a great weight on their shoulders. It may be more difficult for such pastors to function within a setting in which a more exuberant form of worship and ministry is expected.

Before we move on, one more comment regarding roles is in order. During the interview itself, opportunity was given for the participants to read a descriptive paragraph of each of the four roles and to choose which one most closely describes how they remember themselves as children (See Appendix G, Table 9, on p.188).²⁴⁷

246. Sammon, 45-46.

247. Potter, "Construct and Predictive Validity," 90. The four descriptive paragraphs utilized in the semi-structured interview (See Appendix D, p. 174) to self-report the roles are used with permission.

Seven pastors exclusively identified themselves with the hero role, four with the lost child role and two with the mascot role. Four ministers identified themselves with some aspects of both the hero and mascot roles. Two pastors saw aspects of both the lost child and the mascot roles in their lives as children, while two pastors saw some combination of both hero and lost child in themselves as children. A few of the pastors also felt that their role changed during their teen years: one from lost child to hero, one from hero to scapegoat, one from scapegoat to hero and one from scapegoat to mascot.²⁴⁸ Finally, one identified with no role whatsoever.

When we compare these results with the results from the Children's Role Inventory, we find a correlation, at least partially, in 19 out of 26 cases (See Appendix G, Table 10, on p. 188). In other words, for 73% of the pastors, the results from the Children's Role Inventory matched their self-report either outright or partially (e.g. when two roles on the self-report were chosen and one of these was their role choice on the CRI), indicating a sense of self-awareness in a majority of the pastors of the role they took on to bring equilibrium to their homes when they were children.

Not only are the four roles a way of adapting to a chaotic situation, so also is the pursuit of outside activities like education, sports, clubs, music and drama, church, youth groups, etc. Involvement with these activities can provide a safe haven of support and encouragement, a means of success and advancement to build self-esteem, and an opportunity to interact with people from less dysfunctional backgrounds.

With regard to education, 16 of the 26 pastors reported having above average or excellent grades (A's and/or B's). Only two reported have poor or failing grades (D's

248. This change in roles is not uncommon. As older siblings move out of the home or new siblings come into the home, family dynamics change and the roles can as well.

and F's). For a number of the pastors, school was an opportunity to succeed. At the same time, it was also a source of stress for several of the students as the alcoholic parent placed undue pressure on them to succeed. One minister remembered being lectured for bringing home an A- instead of an A. Another recalled always having to get A's to keep her father happy.

Following graduation, every respondent pursued further education. Seven have college degrees. Four have completed college and are pursuing their master's degree. One individual already has a master's degree while another has completed two. One interviewee is finishing up a doctorate, while three credential holders already have completed their doctoral degrees, one of these with a double earned doctorate. In fact, this individual commented that his drive for education flows directly out of the background in which he grew up and could possibly be some overcompensation for it. Education for many provided a lifeline and an avenue of success.

For some pastors, the road to success and self-esteem also came by way of sports, music, drama, and/or clubs. Sixteen participated in some form of sporting activity with seven of these stating that sports were very helpful in coping with their parent's drinking. Thirteen were involved with music and drama with three ministers finding these activities helpful in dealing with their home life. Fifteen were involved with scouting or clubs at school or in the community and six found this to be very helpful in maintaining a sense of self-esteem and accomplishment to counteract a difficult life at home.

Also, for a number of pastors, involvement with church and youth was another way of surviving the chaos at home. Eighteen of the pastors were involved with church and/or youth group growing up with six of these stating that it was helpful to extremely

helpful in dealing with their family life. Several of the pastors remarked that some special person from the church, a youth pastor or a senior pastor, or an older man or woman in the church, ended up being like a father or mother to him or to her. The involvement of such individuals was essential in providing a support network for these pastors when they were children.

Emotional support, however, did not always come from church. For a number of the pastors, there was someone available outside the immediate family of origin with whom they could speak and who loved them and treated them with respect. One pastor remarked that although scouting and music were helpful, on a scale of one to ten, his aunt and uncle were a 10 in his life and absolutely essential in having helped him manage an unmanageable situation.

When we compare the presence, or lack thereof, of an outside emotional support to the CAST scores of the pastors, we get a picture of just how valuable this emotional support system really was (See Appendix G, Table 11, on p. 189). In nine out of the 10 highest CAST scores (90%), there were no emotionally supportive or nurturing people outside the home available to the ministers when they were growing up, whereas, of the lowest 10 CAST scores, there were no such individuals in only 40% of the cases.

A quarter of the pastors (7 out of 26) sought out counseling, Al-Anon (12-step program for families of alcoholics) or read books to address some of the issues related to being the adult child of an alcoholic. However, it was not until they left the house, went to school or started working that they did so. Several of the pastors commented that they didn't realize that their parent was an alcoholic until they joined a group or received counseling and the characteristics of ACOA were shared with them. They were shocked

and their eyes were opened to an understanding of why they had acted the way they did to survive.

Ultimately, however, what preserved these pastors, according to their own testimony, is their conversion to Christ. A relationship with him was the anchor for their life that rescued them, kept them, and gave them hope for the future. Pastor N remarked, “I don’t know if I would be alive without salvation.” A number of the pastors made it crystal clear that if it had not been for Christ, they would have ended up just like their alcoholic parent(s). In fact, several were already heading in that direction, getting in trouble with the law, drinking to excess, and getting in fights when they received Christ as savior.

Five came to Christ as children between the ages of seven and 12. Fifteen of the pastors came to Christ as teenagers, usually because someone invited them to a church where the gospel was preached. For five of these 15, it was only after they finished high school and were either in college or out of the house. Five more came to Christ in their twenties and one in her thirties. Each one testified to the life-changing power of the gospel that gave them new life and a framework to begin to understand and reconcile all that had happened to them as children.

Pastor A said her conversion gave her a “real sense of security,” while Pastor F asserted that his salvation “provided comfort for me in every traumatic situation living with an alcoholic dad.” Pastor L remarked that life was “blah and meaningless” until she came to Christ and, then, “the blah feeling was gone.” Pastor G agreed that after coming to Christ, “life had meaning.” While some pastors described the change in their life as “night and day” or as “dramatic,” others described the growth as more gradual.

For some of these pastors, their conversion to Christ or their decision to go to Bible school resulted in their being kicked out of the house. Eventually, a number of their family members did come to Christ as a result of their stand, including several of the alcoholic parents.

General Positive Long-term Effects

For most of the pastors, it has been over 25 years since they came to Christ. For a few, it's only been 15 years, but for some, it's been over seven decades. The Holy Spirit has had the opportunity to work in the pastors since their conversion, to transform many of the old patterns and to replace them with the fruit of righteousness and truth. Many of the pastors have reflected on what they have experienced and what they have learned and gained from their experience.

When asked what personal strengths they feel they have because they grew up in the families they did, over a third responded with the words "compassion," "empathy," and "sensitivity." Remarks like, "I have an understanding of other people's problems," "I can sense when others are going through what I went through," "I'm sensitive to people with problems and abuse," "I'm empathetic to people," "I have compassion and empathy," "I can identify with people," "I have a desire to rescue people, to help children in broken homes," "I have compassion and sensitivity to people, to misfits and those teased," "I definitely have a sensitivity to people," "high emotional quotient," "understanding of other people's problems," "I know what it's like there," "I read emotions well and people well," "I have more insight," and "I'm intuitive" all reflect the depth of emotional connection these pastors are capable of making because of their backgrounds.

Other pastors remarked about their “determination,” “tenacity,” “survival skills,” being a “fighter,” being “assertive,” “endurance,” and the fact that “nothing is insurmountable that we can’t survive.” They had overcome incredible difficulties and that experience provided many of the pastors with a sense of sticktoitiveness or as Pastor Y succinctly put it, “I’m pugnacious.”

For some pastors, a somewhat opposite strength was mentioned. They learned “sharing,” being “adaptable,” “patience,” “openness,” “a sense of humor,” “consistency,” “dependability,” and a “deep respect for authority.” Others gained the ability to “wait things out,” or the capacity of “internalizing things before I react.” Some learned to “make do with what I have or can do without,” along with an “appreciation for whatever blessing I have,” while others learned to “roll with the punches,” or appreciate “humble beginnings.” The ability “to talk with people and help them,” and “keep the peace” was also mentioned. In fact, Pastor Z said that peacemaking is in his “DNA” and that he “couldn’t think of anything else.”

A “desire to excel and discipline myself” is one of the strengths Pastor R said she gained from her family of origin. Pastor E echoes this thought when he comments, “It made me want to be more disciplined and orderly.” Other pastors added similar things by commenting on their “sense of drive,” “desire to learn,” “commitment to learning,” “strong work ethic,” “sense of responsibility and never being at peace when in debt,” “conviction,” “always striving for excellence,” “independence,” being “practical,” ability to “think for myself and take care of myself,” “decision-making” skills, being “creative,” “leadership,” “high work ethic,” and being “responsible with money.”

A couple of the pastors spoke about learning how to deal with alcoholics and dysfunctional people by what they experienced. Pastor F said he had learned how to trust in the Lord as a child and draw strength from Him because of what he went through.

Surprisingly, several of the pastors were stumped by the question at first. There was a hesitancy in answering by more than one pastor and two additional pastors said, “I don’t know.” Apparently, they had never considered the question before in this context and couldn’t make a connection at first.

When we moved from personal strengths to ministry strengths, it’s not surprising that there would be some overlap. The personal strengths God worked in each of the pastors became available through His Holy Spirit as preparation for ministry.

For example, a number of the pastors again commented on their capacity for empathy and compassion. Pastor U speaks for many when he states that his background with an alcoholic parent enabled him to feel “compassion and caring for others.” Pastor P reiterates this thought by noting that he has “more empathy, sensitivity, sympathy and compassion with people.” Pastor I adds that his experience “brings identification with those going through the same things . . . I’ve been able to relate to people . . . I have a richer background to help people.” Pastor O agrees, and related how his experience made him “sensitive to people going through tough problems.” Pastor S noted that it made him “sympathetic to neglect and other alcoholic related issues,” while for Pastor W his childhood experiences gave him a “desire to assist people.”

For many of the pastors, learning how to work with alcoholics and dysfunctional people was one of the key ministry strengths they gained from their experience. In Pastor R’s case, one of the things she learned is that “addiction doesn’t go away

overnight” and that the “residue can’t be done without God.” She ought to know. Her father stopped drinking for many years only to return to the bottle because he never followed up spiritually nor dealt with root issues. For Pastor H, he learned “how it [addiction] affects people differently.”

Pastor Z stated that he gained the “ability to discern when people are going through it. You can see the telltale signs.” In short, he says, “You get it.” Pastor Y believes it gave him “insights into family life and turmoil.” Pastor Q confirms this fact in his own life when he says, “It made me more aware of people’s backgrounds and weaknesses . . . what makes them tick.” Pastor T makes it clear that he is “not surprised by anything” he has seen. “Nothing really overwhelms me,” he added because “I’ve been there.” Pastor W concurs, pointing out that his difficult background gave him “understanding to minister to people with drinking problems.” Pastor M agrees as well, “You understand what families go through in alcoholism.” Pastor H perhaps sums it up best when he simply states, “I know.”

Two of the pastors said their experience provided them with a drive to succeed in ministry. Pastor E, in fact, commented, “I’m a self-starter” and then added, “I never did any ministry that I haven’t pioneered.” In a similar vein, Pastor N noted that he has a burning “drive to accomplish things for God.”

Other strengths, as well, were gained by these pastors, as is reflected in their statements, “It helps in my preaching,” “I’m not afraid to make decisions and to take a risk after prayer and thought,” “It helped me to value people and see hope in everybody no matter how low or deep they are in life,” “I like fixing things and building things,” and “I try to see the good in people no matter how bad.” They also noted additional strengths

like “peacemaking,” being “off the charts in leadership,” being “more tolerant of people’s shortcomings,” being able “to trust the Lord,” and “the importance of relating to people,”

As with the question on personal strengths, so also here, several of the pastors appeared clueless. One pastor, when asked the question about preparations for ministry from what he experienced growing up in an alcoholic home honestly remarked, “It’s a tough one. I don’t know if I have enough insight to answer this.” Another one chuckled when asked the question, adding, “Hadn’t thought about it.” A similar refrain was heard from a third pastor, while a fourth pastor simply said, “I don’t know.”

General Negative Long-term Effects

In spite of both personal and ministry strengths that most of the pastors were able to identify, not every effect, obviously, was a positive one. There were negative consequences as well, hindrances to life and ministry, and to these we now turn.

When asked to describe the ways in which their lives or ministries had been hindered by growing up with an alcoholic parent, over 38% of the pastors at first denied any real negative effects or they confessed to being unaware of what they might be. Pastor D, for example, paused after I asked the question, and then said, “Ohh! Gee! Probably are those areas. I don’t know what they are.” This statement seems to express a genuine lack of self-awareness.

However, when given time to reflect about possible connections between growing up with an alcoholic parent and hindrances in their life and ministry, many of the pastors, for the first time, began to consider that might have happened. Pastor M, for example, at first remarked, “I don’t know. My hunch is there is some.” Then, as he thought about it, he confessed to “drinking and drugging as a teen,” and the fact that “part of me is driven.

I need a mountain to climb. I need a challenge or I lose interest.” He wondered if there was a connection. In Pastor X’s case, she too acknowledged, “I don’t know. I never looked.” Then, she began to rattle off several areas that have been affected, from her difficulty in trusting God at times, her tendency to get nervous and worried, and the fact she hated holidays for such a long time because of what she experienced as a child.

Pastor L also initially did not think there was any connection but then she noted that if her dad had not turned to the bottle when she was 13 years of age and had kept with the Lord and reading the Bible to the kids, she would have been better equipped and would have avoided some difficulties.

Pastor B was another pastor who did not believe there were any ill effects either on his ministry. He felt that God had released him. Interestingly, at the same time he was saying that he had no regrets about his childhood, he was sharing painful memories of how his father never came to any events nor encouraged him in education, sports, music or drama. When Pastor Q was asked about any hindrances, he let out a “Hmmm” and then wondered out loud if his attempts at trying to make peace in the home growing up as a child could be related to his attempts to “make sure everything is smooth” as an adult.

Both Pastors U and V pointed to their new life in Christ as a reason for why they did not feel there were any current hindrances to their ministries or lives. Yet, both then went on to express some areas that may have been affected. In Pastor U’s case, he talked about using food as a relief, of not always knowing how to handle stress and the fact that because of his background forming habits quickly could be a problem. For Pastor V, painful memories return from time to time from her painful childhood.

Other pastors readily admit there have been hindrances in both family and ministry. Their comments reflect the wide array of negative effects that can be produced in a child of an alcoholic. “I have a hard time saying things to people,” noted Pastor J. He went on to add that sometimes he is “too quiet” and has “some insecurity.” Other pastors shared this last sentiment, as well, as is obvious from statements like, “I didn’t have a lot of confidence,” “I definitely have insecurities that arose during that time,” “It took me so long to have any confidence in what I do. I was so defeated in high school,” “I don’t want to be disappointed and fail,” and “I had a tremendous inferiority complex and it pushed me to get two PhD’s.”

Two pastors felt their inability to follow through and finish things is the direct result of growing up in a home with an alcoholic parent. Several wish they had applied themselves more in academics or had decided to get involved with sports but were not encouraged by their alcoholic parent to do so when they were children. For example, Pastor N said “I could have been more responsible.”

Speaking of children, Pastor T confessed that in dealing with his children, he has been “too soft” and that “compassion became negligence.” He added that he had “weak character in dealing with his children” and “too much compassion and not enough discipline.” Pastor Q agreed, believing that he has been “too quick to excuse behavior.” Pastor N has done so too, noting that he has not been a “good disciplinarian” and that in the past, he has erred on the side of “allowing dysfunction to continue.”

On the other hand, Pastor R felt that her childhood produced the opposite result and she has struggled with being too hard on her children in pushing them to succeed

with unrealistically high standards. Pastor E concurs but his standards, he states, have been directed toward himself and drive him in the “pursuit of perfection.”

For two of the pastors, their tendency to live by their emotions has been a hindrance at times in the past. They both testify that over the years God has helped them but that has been an area of weakness. Pastor R commented that she has had to deal with a lot of anger and learn to let go and forgive. She added that learning to trust her husband was difficult for many years because she couldn’t trust her father growing up and this hindered her marriage in the early years.

Several of the pastors have struggled with a sense of abandonment and loneliness, along with cycles of depression and low self-esteem. Pastor O remarked, “It’s easy to quit. I didn’t feel important or that I mattered.” Pastor G longed to speak to his alcoholic father but “dad doesn’t want to do it.” To this day, this pastor’s father has chosen not to call or be in the lives of his grandchildren. No wonder this pastor has struggled with depression and painful memories from his past. Pastor P has struggled as well over the years with what he calls, “emotional baggage.” He also admits to struggling with a lot of anger and depression and acknowledges that it negatively impacted his marriage for many years.

Finally, several of the pastors remarked about how they felt cheated because they never learned things from their father that other sons learned. Pastor T admitted that he has no idea how to relate to men, how to lead a men’s program or how men relate to each other since he never saw it modeled. Pastor N regrets that he never learned how to be a handyman from his father because his father was not there. Pastor Z acknowledged that his view of God was affected and it took a long time to be healed enough to experience

the “unconditional love of the Father.” Other pastors also remarked they just did not have godly parents there to teach and train them in the things of God and this, obviously, affected them. Pastor C sums it up well when he states, “If only,” and then adds, “If only I had a Christian father, I could have avoided some unhelpful relationships.”

Certainly, it is clear from these statements that most, if not all, of the pastors have been impacted negatively in some way by their experience of growing up in a home where alcohol was abused. For some, it was worse than others. In some cases, it was in one area but not in others.

One of the areas I suspected that would show evidence of difficulty for a sizable majority of the sample was in their emotional development. So often, due to trauma, we develop “frozen areas” in our lives, places where our emotional development is stunted. As long as things are going our way and no one is touching one of those areas, we function well. The moment someone gets too close to these wounded spots, we usually react with a default defense mechanism to keep ourselves safe. As we pointed out in chapter two, however, when there is a lack of integration between our spiritual life and our emotional life, it can, and will eventually be disastrous. This is the point of Scazzero’s work and the basis for his Inventory of Spiritual/Emotional Maturity that was utilized as Inventory #1 in the interviews (See Appendix G, Table 12, on p. 190).

The majority of pastors scored well in the area of general formation and discipleship (Part A of Table 12) with 20 out of 26 pastors scoring as emotional adults according to Scazzero’s scale. This would be expected since discipleship, Bible study, worship and prayer are activities most pastors usually practice in some form or another

on a regular basis. Two additional pastors were borderline adult/adolescent and four were in the adolescent stage.

Where the focus is on levels of emotional maturity in the inventory, however (Part B of Table 12), the scores begin to reflect a measure of brokenness and immaturity. For example, on scale P1 (Look Beneath the Surface), only 15 pastors (58%) scored on the emotional adult level, while nine were in the emotional adolescent category. One pastor was on the borderline between emotional adolescence and emotional childhood and one was fully in the emotional childhood stage. The P1 scale measures our ability to be honest with ourselves, to be self-aware, to be free in our ability to feel and share emotions, and to feel and deal with anger appropriately. Several of the pastors in the interview seemed to lack these abilities and this is reflected in the results.

In scale P2 (Break the Power of the Past), the focus is on how the past affects our present, learning to accept and work through past issues, dealing with conflict in a healthy way, and accepting responsibility for what is going on inside of me rather than blaming others. On this scale, 14 pastors were in the emotional adult category, one was on the borderline between emotional adulthood and emotional adolescence and eleven were emotional adolescents. When I spoke with the pastors, many of them believed they had come to grips with how the past had affected them or were at least trying to do so. These results indicate that 46% (12 out of 26) still have some work to do in this area. Perhaps that is why so many pastors had trouble answering the question regarding what hindrances they saw in their lives and ministries as a result of growing up in a home with an alcoholic parent. They do not see it and, therefore, it continues to affect their “now” as is evidenced in the number of lower scores on this scale.

The P3 scale (Living in Brokenness and Vulnerability) goes beyond just being real but also being able to acknowledge and own our weaknesses and failures, being transparent, approachable and correctable, and not being critical or judgmental. As with the P2 scale, so also here, 14 pastors scored in the emotional adult stage and one scored on the borderline between emotional adulthood and emotional adolescence. This time, however, only 10 scored in the emotional adolescence range and one was on the borderline between emotional adolescence and emotional childhood.

Several of the pastors commented on how difficult it is at times to receive criticism gratefully and not be offended or hurt. When a person grows up with constant criticism and putdowns, as has occurred in many of these pastor's lives, it often leads to a greater difficulty in receiving criticism, even constructive criticism, willingly and gladly when one becomes an adult. The scores again reveal there is work to be done in almost half the pastors in this area.

The P4 scale (Receiving the Gift of Limits) evaluates the individual's ability to set healthy limits in their life, to be able to say "no" without guilt, to live a life of balance and not overextend one's self. As I suspected, most of the pastors had trouble in this area. In fact, of all seven of Scazzerro's scales, this one, P4, showed the lowest scores for the pastors in our sample.

Only five scored in the emotional adult stage of growth. The bulk of the remaining pastors (15 out of 21 - 71%) scored in the emotionally adolescent stage. One pastor scored on the borderline between emotional adulthood and emotional adolescence while the remaining five scored in the emotional child stage of development. These results are not surprising.

The temptation to take responsibility for everyone and everything often flows out of a need to protect ourselves, to keep things safe. It's easier to take everything on and feel like one is in control than to delegate and risk losing anything.

We also struggle with limits because we erroneously believe that we are saviors to the world and that if we don't do it, it won't get done. Many pastors who grew up in homes with an alcoholic parent learned to accept responsibility far beyond their years. As hero children, they gained their worth by performance. Old habits do not die hard and usually carry on into adulthood. Pastor N, a hero child, spoke about the sense of responsibility he felt for the church and ministry but confessed that he "can't always shut things off." This is reflected in the fact that he scored as an emotional adolescent in this scale. For Pastor Z, this "worth by performance" is evidenced every week when the attendance at church drops off. It makes him "feel like a failure, leading to depression." Of course, the "solution" is simply to work harder next time. It is this tendency to do this, which is no doubt evidenced in his score of emotional adolescence on this scale.

Pastor K readily acknowledging struggling with "boundary issues." In fact, she confessed, "At times, I feel like I have to do everything. I have to give out to everyone." What is ironic is that she noted "when you're not normal, you do better in ministry to people in your congregation, but at the cost of killing yourself." It's no surprise then that she scored as an emotional child on this particular scale.

As we pointed out in both chapters one and two, for many adult children of alcoholics, the need to please people is ingrained within from their childhoods. We need people's approval to feel good about ourselves, so, we acquiesce to their requests, violating our own boundaries in the process. Perhaps, in many ways, these pastors are

still trying to please an unpleaseable alcoholic parent. Old patterns often linger into adulthood, and, for these pastors, it is reflected in their scores on the P4 scale.

Although the P4 scale was the lowest overall score of Scazzero's seven scales, the P5 scale (Embrace Grieving and Loss), was not far behind. It had the second lowest set of scores of all the scales. The P5 scale measures one's ability to both feel and acknowledge pain and loss rather than to deny or suppress it, pretending that everything is fine. The higher the score on this scale, the better one's ability to work through loss and disappointment and the more available one is to others who are grieving. Only 38% (10 of 26) were able to do this adequately enough to make it to the emotional adult stage. One was on the borderline between adulthood and emotional adolescence, while eight were fully in the adolescent stage. One pastor scored on the borderline between adolescence and childhood, while almost a quarter (6 of 26) scored in the emotional childhood stage. In fact, more pastors scored in the childhood stage on this scale than on any other scale. Again, this is not surprising. Many of these pastors endured such traumatic experiences as children that repression and suppression of memories and emotions would not be uncommon. It was too much for a little child to be able to handle.

In addition, in many of the homes, the expression of emotion, particularly negative emotion, was never allowed anyhow. So, what were these children to do with the emotion? They often disassociated from it, that is, they split off from it and pretended it didn't exist. Unfortunately, this did not remove the emotion, it just made it inaccessible.

During the interviews, however, as I pressed the issue as “one of them,” I caught glimpses of unresolved pain, deep losses never grieved, disappointments never faced, and tears never shed until that moment. The fact that 61% of the pastors (16 of 26) were not in the adulthood stage on this scale would seem to indicate their inability consciously to process their painful emotions in a healthy way or their unwillingness to do so.

In the final scale, the P6 scale (Make Incarnation Your Model For Loving Well), the scores rebounded dramatically. Nineteen of 26 pastors (73%) scored in the adulthood stage of development emotionally. There were no pastors who scored in the childhood stage on this scale. One pastor was on the borderline between emotional adolescence and emotional childhood, while another was on the borderline between adulthood and emotional adolescence, with the remaining five pastors fully in the emotional adolescent stage.

This implies that most of the pastors understand and desire to live out Christ’s mandate to love one another as foundational to the gospel, to suffer with those who suffer and to rejoice with those who rejoice, empathetically listening to their flock and attempting to care for their flock’s needs. Of course, this ought to be expected since many of the pastors excel in empathy, sensitivity and compassion.

Another comparison is seen when we explore the link between the scores on the inventory and the age of the pastor (See Appendix G, Table 13, on p.191). What we discover is that the older the pastor, the higher the scores generally are on the inventory scales. For example, for the 10 youngest pastors, they cumulatively scored in the emotional adolescent/child stage or emotional child stage on a total of 13 scales, indicating a lack of emotional maturity. On the other hand, for the 10 oldest pastors, they

cumulatively scored in the emotional child stage on a total of only two scales and did not even score one time in the borderline emotional adolescent/child stage of emotional growth. Also, when we look at the total number of adult scores based on age, we note that of the 10 oldest pastors, six of 10 had six or seven scales in the adult stage of development, whereas only two out of the 10 youngest pastors had similar results.

Although not a hard and fast rule, these results could seem to suggest that younger pastors just have not had enough time, ministry experience or self-awareness to begin working through all the emotional effects of growing up in a home with an alcoholic parent. This seems also to be borne out by the fact that, in 40% of the cases (4 of 10), the youngest pastors did not score even one scale in the adult range, whereas not even for one of the 10 oldest pastors was this the case. Each one of the older ministers had at least one scale where they scored in the adult range.

Before we move on to examine how growing up with an alcoholic parent(s) affected the pastors specifically with regard to the five characteristics, I want to explore one more matter with regard to the spiritual and emotional inventory. We have already summarized the results of each scale and determined where the pastors, as a group, are the most developed (Spiritual Formation and Loving Well) and where they are the weakest (Accepting Limits and Grieving Losses), and as we already mentioned, both sets of results were expected. We have not, however, explored how emotionally developed each pastor is cumulatively across the seven scales. Such a comparison would be helpful (See Appendix G, Table 14, on p. 192).

The results reveal that only 4 of the 26 pastors (15%) scored in the adult stage on all seven scales, indicating solid emotionally healthy maturity. Another six (23%) scored

in the adult stage in six of the scales, also indicating fairly solid adjustment. For five of these six pastors, the adolescent score was in the area of accepting their limits. Sadly, according to the data, over a quarter of the pastors (7 of 26) had either no scales or only one scale in the adult stage of development. This certainly would seem to indicate that these pastors are “stuck” in their emotional development.

Specific Effects on the Five Characteristics

Having looked generally at both the strengths and weaknesses that result from growing up in a home where alcohol was abused, including the pastors’ emotional development, it is time to examine specifically how growing up with an alcoholic parent affects the adult child in the areas of conflict avoidance, people pleasing, perfectionism, empathy and sensitivity. Some of these effects have already been hinted along the way, of course, but now we focus on these five areas intentionally.

Conflict avoidance is the first characteristic under consideration. As was previously mentioned in chapter four, the Thomas-Kilman Conflict Mode Instrument specifically identifies the ways in which a respondent deals with conflict. We had hypothesized that scores would be highest in the conflict avoidance mode and in the conflict accommodating mode. This is so, because whether one always runs from conflict or always yields to the opposing party, neither approach assertively deals with conflict.

This is not to imply that either of these approaches may not be useful at times. Temporary timeouts or yielding on matters of little importance can certainly be appropriate and even beneficial. The danger is when a person turns to these two modes reflexively on a regular basis and is unbalanced in addressing the conflict. Sometimes,

compromising, collaborating, or competing are healthier ways of dealing with conflict depending upon a particular situation. Healthy resolution of conflict requires a person to be open and able to use any one of the five modes depending upon the circumstances since, as Thomas and Kilmann make clear in their instrument, each is valuable at one time or another.²⁴⁹

The problem for ACOA, however, is that they rarely, if ever, witnessed conflict being addressed in a healthy way in their homes growing up. There were no role models to follow that were functional. Indeed, when asked to describe in what ways did conflict get handled in their families, many simply responded, “It didn’t!” Verbal fights, yelling, cursing, insults, physical violence and beatings, pandemonium, and slamming of doors were all typical during seasons of conflict and conflict was usually rampant whether the parent was drunk or not, although drinking regularly exacerbated the situation.

One pastor recounted an incident where his dad threw mashed potatoes across the table. Pastor Y remembers how his drunken father would chase him down the street with a butcher knife or a shotgun. Still another pastor remembers crying out to his dad to “stop, stop, stop” when his dad was slapping his mother repeatedly during a conflict between the parents. One pastor stated that when he was a teenager, he went to his mother’s defense when she was being beaten and came after his stepfather with a fireplace poker. He added that if he had a gun at the time, he would have shot him. Pastor R summed up her traumatic experience in dealing with conflict in the home with the graphic description, “it was literal blood and gore.” In a very few cases, the pastors

249. Kenneth W. Thomas and Ralph H. Kilmann, *Thomas-Kilmann Conflict Mode Instrument* (Mountain View, CA: Xicom, Incorporated, 2007), 12-16.

reported no conflict, but that was only because family members were not speaking to each other.

Most of the time, the pastors recalled just trying to survive and/or stay out of the way. Withdrawal was a typical response. Occasionally, they sought to be a peacemaker to smooth things over, while, at times, some of the pastors confessed to jumping into the fray.

Without healthy role models to follow, many of these pastors acknowledged having no conflict resolution skills to draw from. When asked how they handled conflict in their ministry, some of them answered with short replies like, “man,” “oooh,” “not good.” Pastor H chuckled and acknowledged that he had “made mistakes by not addressing things.” Pastor D stated that he ran “the whole gamut . . . from ignoring it to overdoing it.” He adds that he doesn’t have a “consistent way of dealing with it” because he “didn’t have much conflict resolution skills.” Pastor O admitted that he tried to avoid conflict and that he doesn’t deal well with it. He confessed that his typical tendency in the past was “to get angry and hotheaded real fast . . . to be aggressive.” He went on to add that his feelings were “don’t tell me I’m wrong. Let me say my piece.” Pastor Y was not far behind in his response, “Initially, I would take them behind the barn and whip their butt.” He says, as he has matured, he may still feel the same way but he attempts to be “restorative rather than punitive.”

Many of the pastors admitted to hating conflict or confrontation. They would back off, ignore it or run away from it. Pastor K said “it’s not in my nature. It’s not a natural thing. I don’t like confrontation.” One elderly pastor admitted that now when he looks back on his life he realizes the tendency to run from conflict probably caused him

to leave churches and ministries when he could have worked through it and stayed. Other ministers said they tried “to compromise where possible,” “be gracious,” be the “better person,” “pray,” “think about it a lot,” and “go back to the rules.” I found this last statement interesting and, when I asked Pastor E to elaborate on it, he informed me that he “couldn’t rely upon a clear-thinking parent, so he needed a “standard conventional concept” that everyone agreed upon as the basis for resolving conflict.

Most of the pastors readily pointed out that even if they hate it, they still try to resolve conflict. They know that they can’t ignore it forever. It only gets worse. The hard part is that for many of the pastors they lack the tools and skills and have tried to learn them the best they can along the way.

Not a few pastors, though, did feel they dealt well with conflict, drawing upon the skills of peacemaking they learned through many years of childhood conflict. They spoke about “talking it out,” how they “worked towards an amicable solution according to the Scripture . . . acting as professionally as possible,” the need to “get all the facts and don’t react rashly,” and to “try to isolate them from places where the conflict reaches and get them one on one to hear them out and answer their questions.”

When we compare the pastors’ comments regarding conflict to the scores on Inventory #6, we discover that there is a strong correlation (See Appendix G, Table 15, on p. 193). As evidenced above, a majority of the pastors admit to having some difficulty in dealing with conflict and the results bear it out. In almost all cases, the pastor’s choice revealed his or her inclination to avoid or accommodate.

Avoidance was ranked as the typical or first-choice mode of conflict resolution for 62% of the pastors (16 of 26), while accommodation was ranked even higher at 69%

(18 of 26). In contrast, competing and collaboration were only ranked by 12% of the pastors respectively (3 of 26 and 3 of 26), while compromise was marked just 4% of the time as the preferred skill or mode of dealing with conflict (1 of 26).

Notice also, that for two-thirds of the pastors who chose conflict avoidance as their typical conflict resolution skill, they also ranked accommodation as high also. In other words, for almost half the pastors (12 of 26), they will either run or give in just about every time. These results would certainly seem to support the contention that conflict avoidance is one of the negative characteristics that many adult children of alcoholics have in common.

The results of the Thomas-Kilmann Conflict Mode Instrument not only support the concept of conflict avoidance, they also give indication of some people pleasing tendencies as well. Accommodation, according to the authors of the instrument, occurs when “an individual neglects his or her own concerns to satisfy the concerns of the other person; there is an element of self-sacrifice in this mode.”²⁵⁰

This element of personal neglect and self-sacrifice to satisfy the concerns of the other person may, at times, be an altruistic and beneficial act. One thinks of Paul’s words concerning Jesus in Philippians 2:7, who “made himself nothing, taking the very nature of a servant, being made in human likeness” as an example of laying aside one’s own needs to give to others.

The fact that the highest typical response of pastors is accommodating probably speaks more to the brokenness of the pastor, however, than to the beneficial giving to another soul in need. For adult children of alcoholics, altruism is usually not at the heart of self-sacrifice but a twisted selfishness is, as was made crystal clear in chapter two. We

²⁵⁰Ibid., 8.

please people because we need people. It is about us and not really about them. The high scores on this inventory in accommodating are just an indicator of pastoral ACOA's tendency to people please, the second negative characteristic under consideration.

This conclusion, if correct, should be supported by the results of the Sensitivity to Rejection Scale.²⁵¹ According to its author, "Sensitivity to rejection in social relationships is almost synonymous with general social submissiveness. Sensitive individuals generally feel that they lack control or influence in their social interactions; instead, they feel controlled and influenced by others."²⁵² He goes on to add that "some manifestations of this are reluctance to express opinions, avoidance of arguments or critical discussions, reluctance to make requests or to impose on others . . ."²⁵³ It would appear then, that sensitivity to rejection, would be a precursor to people pleasing. Because one fears rejection, he or she gives in. Sensitivity to rejection, therefore, could be an indirect indicator of one's tendency to people please rather than stand up for what feels and thinks. If the results are elevated on this inventory, it would bolster our conclusion regarding people pleasing being one of the characteristics pastors who were raised with an alcoholic parent share in common.

Twelve out of 26 pastors (46%) indicated through their answers that they have elevated levels of sensitivity to rejection (See Appendix G, Table 16, on p. 194). Four of the 12 pastors scored in the slightly high range, which indicates that 69% of the general population has a lower score. Five of the pastors scored in the moderately high category, a range that is higher than 84% of the population. Another two pastors were in an even

251. Albert Mehrabian, *Manual for the Sensitivity to Rejection Scale (MSR)*, 1994. (Available from Albert Mehrabian, 1130 Alta Mesa Road, Monterey, CA 93940). Used with permission.

252. Ibid., 2.

253. Ibid.

higher bracket, the very high category, which means that 93% of the population has a lower score. Finally, one pastor scored in the second highest range available, the extremely high category meaning that only 2% of the population has a higher score. These results seem to support our contention that people pleasing is another of the negative characteristics that many of our ACOA pastors share in common.

The third characteristic under consideration in this thesis is perfectionism and, as was mentioned in chapter four, three different means were implemented to test the perfectionistic tendencies of the pastors in our sample. The first means consisted of responding to a definition of perfectionism (see the semi-structured interview in Appendix D, p. 178, for this definition) on a scale from one to five (not at all to definitely) as to whether is applied to them or not. This self-report generated 16 out of 26 responses (61%) in the affirmative (See Appendix G, Table 17, on p. 194). Specifically, five pastors gave themselves a five on the scale indicating they definitely view themselves as perfectionists. An additional nine pastors indicated they saw themselves as a four on a scale from one to five. They do see perfectionistic tendencies in themselves but do not believe they are full-blown perfectionists. Two pastors gave themselves a mark somewhere in-between these two scores. The rest of the pastors did not really consider themselves as perfectionists with a couple of the pastors adamant that they definitely are the opposite of perfectionists.

A second means for testing the perfectionism of the pastors was the Hewitt and Flett Multidimensional Perfectionist Scale. As mentioned in chapters three and four, on this instrument, respondents are able to be tested on their perfectionistic tendencies in three dimensions: self-oriented, other-oriented, or socially prescribed perfectionism.

Scores are then compared against norms to determine whether the respondent is a perfectionist in any one or all of the three dimensions. The higher above the mean the score is on a particular subscale, the stronger the perfectionistic tendencies. Scores below average range indicate no problem with perfectionism.

The results of the pastors' testing indicate that 11 of the 26 pastors have elevated levels of perfectionism from between .5 to 2.5 standard deviations above the mean in at least one of the three dimensions (See Appendix G, Table 18, on p. 195). Six of the pastors have elevated scores in the self-oriented perfectionism subscale indicating that their unrealistic standards are directed against themselves. Seven pastors have elevated scores in the other-oriented perfectionism subscale which denotes that they direct unrealistic standards towards those around them. Finally, six pastors have elevated scores on the socially prescribed subscale which indicates they feel the pressure to measure up to a perfectionistic standard coming from those around them.

When the scores are compared across the three subscales, we observe that two of the pastors have elevated scores in all three dimensions of perfectionism, three additional pastors have elevated scores in both the self-oriented and socially prescribed dimensions, and one pastor has an elevated score in both the self-oriented and other-oriented dimensions. Four pastors have elevated levels in only the other-oriented subscale, while one pastor has an elevated level in only the socially-prescribed dimension of perfectionism.

The third means of assessing the perfectionistic tendencies of this sample of pastors is through Frost's Multidimensional Perfectionism Scale, also mentioned in chapter 4. The results from Frost's instrument will allow us to assess perfection in the

pastors over a number of other dimensions of perfectionism, as well as assess the type of perfectionism present, whether adaptive or maladaptive. Once we review these results, we will then compare all three measures of perfectionism to determine whether perfectionism is one of those characteristics common to pastors who are adult children of alcoholics.

The results of Frost's instrument indicate that only three pastors (Pastors A, D, and E) have overall scores (four or above) clearly indicating perfectionism (See Appendix G, Table 19, on p. 196). An additional five pastors have scores between three (neither agree or disagree) and 4 (agree), which could indicate possible latent perfectionistic tendencies, particularly the one closest to the four (Pastor P).

When we compare the totals from the self-report (where 16 of 26 pastors affirm some perfectionistic tendencies), and Hewitt and Flett's MPS (11 of 26) with Frost's scores (only three of 26 are definite perfectionists and five are borderline), there seems to be a discrepancy among the results. One possible solution is that the pastors' self-classification may be in error. If this were the case, then the results from Frost and Hewitt and Flett's MPS would be within three pastors of each other, assuming those leaning perfectionistic in Frost's scale are counted as perfectionists.

Another solution, and one that carries more weight in my mind, has to do with the distinction between adaptive and maladaptive perfectionists. As mentioned previously in chapter three, high scores on the personal standards and organizational subscales of Frost's instrument seem to indicate a form of adaptive perfectionism. When those pastors whose scores indicate adaptive perfectionism (four or higher on personal standards and organization) are added back into Frost's figures, the totals increase from three definite

perfectionists to 10 total adaptive and maladaptive perfectionists, plus an additional three borderline adaptive perfectionists (where one of the scales is over four and the other is between 3.5 and 4). This would bring Frost's numbers more in line with the self-report figures and Hewitt and Flett's totals and would mean that the total number of pastors in our sample classified as perfectionists would range from as low as 46% to as high as 62% depending which of the three measures is used, or basically half the pastors, a sizeable number and apparent confirmation that many of the ACOA pastors in our sample share another characteristic in common.

When we turn to the last two characteristics, empathy and sensitivity, we already have an abundance of testimony from the pastors themselves that we have reviewed and included to this point. Their comments came in answer to questions that were general in nature regarding their strengths personally and in preparation for ministry but did not mention either of the characteristics by name. When they offered their answers regarding sensitivity and empathy, therefore, they did so only because they self-reported seeing these qualities and not because I led them to the answer. In addition, each interview was individually conducted with no opportunity for the participants to know what the other pastors had shared. The fact, then, that so many pastors mentioned one or both of these qualities indicate they see them in high supply in their lives.

However, just because they say it or claim to see it does not necessarily mean they possess those qualities. It is for this reason that two specific measures were included for each characteristic to assess whether these pastors do have what they claim to have.

First, with regard to empathy, each pastor was asked near the end of the interview, "Have people commented to you about your ability to empathize with them in their

struggles?” I purposely waited until the end of the interview so as not to prejudice their earlier answers. Also, I did not ask if they had empathy but rather did others confirm they had it. The follow-up question asked them to relay what has been said by others about their ability to empathize.

An astonishing 88% of the pastors (23 of 26) noted that individuals had confirmed in some way their ability to empathize with them. Repeatedly, they were told, “You understand where I’m coming from,” “You’re with me,” “I know you listen,” “I feel like you’re one of us,” “You understand what I’m going through,” “You’re down to earth and I can talk to you,” “You know what I’m feeling,” “You make me feel important,” “When no one understood, you did,” and “I never met a person that accepts people like you do.”

Pastor K was asked, ““How did you know that? How did you know that I felt like that?” while Pastor Y was asked, “You don’t seem like the normal preacher. Why are you able to understand?” Each of the statements certainly seems to be some evidence that these pastors operate with a high degree of empathetic listening and understanding that grew out of their experience as children.

Further evidence of these pastors’ empathy quotient, if you will, can be seen in the scores from the Balanced Emotional Empathy Scale.²⁵⁴ As was previously mentioned in chapter 3, the instrument’s author, Mehrabian, identifies emotional empathy as “one’s vicarious experience of another’s emotional experiences -- feeling what the other person feels.”²⁵⁵ He goes on to add,

When used as a description of a trait or personality characteristic, ‘Emotional Empathy’ describes individual differences in the tendency to feel and vicariously experience the emotional experiences of others. The trait of Emotional Empathy

254. Albert Mehrabian, *Manual for the Balanced Emotional Empathy Scale* (BEES), 2000. (Available from Albert Mehrabian, 1130 Alta Mesa Road, Monterey, CA 93940). Used with permission.

255. *Ibid.*, 2.

therefore helps distinguish persons who typically experience more of other's feelings from those are generally less responsive to the emotional expressions and experiences of others.²⁵⁶

Half of the pastors (13 of 26) indicated by their scores that they have elevated levels of empathy (See Appendix G, Table 20, on page 197). In four of the cases, their level is slightly high, indicating a level that is higher than 69% of the general population. Another five pastors scored in the moderately high category, which is in the 84% category. Two pastors were even higher with scores in the very high range, indicating scores higher than 93% of the general population, and two more pastors were higher still, with one in the extremely high range and one in the very extremely high range. For these two pastors, they were in the top 2% of all people in terms of empathy. Given the fact that 50% of the pastors exhibited empathy levels above the mean and over two-thirds of these scored higher than 84% of the general population, it would appear that empathy is another similar characteristic found in our sample of pastors who are adult children of alcoholics.

The final characteristic under consideration, sensitivity, was also addressed near the end of the interview in a similar vein to the one on empathy, "Have people commented to you about your ability to 'read' people and situations?" Rather than asking the pastor if he or she could read people since most had already intimated that they could during the interview, I was interested if their claim could be substantiated by those whom they serve. Nineteen of the 26 pastors answered the question in the affirmative. When asked the follow-up question as to what others had said, the pastors replied, "You understand," "Nobody is able to understand me like you do," "You read my mind," "You

256. Ibid.

have insight,” “You hit a button,” “You really know that person,” “You know what I’m feeling,” and “You know everything.”

Most of the pastors chalked up their ability to read people to the discernment of the Holy Spirit. Without discounting his gifting or role, however, it’s also clear that many of these pastors learned to read the situation growing up as a matter of survival. Pastor R remembers the body language her father would exhibit just before he hit her. He had a particular way of clenching his fist that she remembers. She then thoughtfully acknowledged, “I always thought it was discernment. Maybe it is what I’ve gone through.” Pastor H testified that he was “sensitive and observing,” looking for signs and body language, and then trying to figure all the signals out. Pastor M also affirmed that he was good at “picking up on clues.” Pastor Z echoes this thought when he said, “I can pick up with men right off the bat. I have discernment and I can sense it.”

Other pastors, as well, confirmed their ability to “sense things,” “pick up on nonverbal signals,” and just know without people telling them, although Pastor X, did admit to being wrong before. Sadly, there were a couple of pastors who admitted they do not know people, nor do they self-disclose. They have been hurt as children and also have been hurt in ministry and did not want to take a chance again.

To confirm the characteristic of sensitivity beyond the affirmations of the people the pastors serve, the Reading the Mind in the Eyes test was given. The results generally support the idea that, as a whole, the pastors in our sample have a high degree of sensitivity to nonverbal cues (See Appendix G, Table 21, on p. 197). A mean of 26.2 and a standard deviation of 3.6 were utilized based upon Baron-Cohen’s research in 2001

in which he tested his revised edition of the test with a general population control.²⁵⁷ It is acknowledged that his sample was small ($N = 122$) but I needed some comparison that would allow for at least a tentative evaluation of the results. According to his research, a typical score is the range of 22 - 30. If someone scores over 30, then he or she is very accurate at decoding a person's facial expression around their eyes. For those scoring under 22, they find the task more difficult.

Over half the pastors (14 of 26) had elevated scores with this instrument, ranging from .5 deviation to two deviations above the mean. Specifically, six pastors scored .5 deviation above, five more were at the .75 deviation above level, one score reached the 1 deviation above range, and the remaining two scored 1.25 and 2 deviations above the mean, respectively.

Such results, when coupled with self-reporting, and confirmed by the congregations the pastors serve, seem to suggest strongly that another common characteristic of these ACOA pastors is they have sensitivity to body language and non-verbal cues. Because of everything they experienced growing up in a home with an alcoholic parent, they gained the ability to read people, became adept at picking up on nonverbal cues, and developed a sensitivity to the thoughts and feelings of those around them as a matter of survival. This characteristic has stayed with them and has proven a beneficial tool in ministry based upon their statements.

I know, in my own ministry, I have seen this characteristic at work regularly. The ability to pick up such clues has been invaluable in counseling individuals going through

257. Simon Baron-Cohen et al., "The 'Reading the Mind in the Eyes' Test Revised Version: A Study with Normal Adults, and Adults with Asperger Syndrome or High-functioning Autism," *Journal of Child Psychology and Psychiatry* 42, no. 2 (2001): 245.

difficult experiences, particularly when they have difficulty articulating what they are feeling and thinking.

Having now tabulated, analyzed and discussed the findings of both the semi-structured interview and the scales, it is time to draw some final conclusions and suggest possible future courses of action. We will do so in the last chapter.

Chapter 6

Summary and Future Studies

This project was initially launched with the goal of testing the thesis that there are common characteristics (*both positive and negative*) of adult children of alcoholics that impact pastoral leadership. Of the many characteristics, we focused primarily on five: conflict avoidance, people pleasing, perfectionism, empathy and sensitivity. In this chapter, we want to draw conclusions from the research, acknowledge the limitations of this project, lay out a direction for future studies and provide some practical suggestions for denomination leaders and Christian institutions of higher learning in how to meet the unique challenges of pastors who were raised in homes with an alcoholic parent.

Growing up in a home where alcohol was abused can be a nightmare. It can have traumatic effects on the children while they are in the home and it can still impact the children when they become adults and have left the home. Just listening to the stories of so many of these pastors confirms this fact. Alcoholic homes do affect people, even if those people are pastors. They are not immune. To be sure, not every person is affected the same way or to the same degree but people are affected. The clinical literature and the empirical research agree on this reality.

When asked to summarize for me their final thoughts at the end of the interview about their experiences growing up, most of the pastors did not deny that they had been negatively impacted in different ways and places. They talked about their loss of childhood, their shattered dreams, the neglect, their own early struggles with alcohol, the pain caused to their families because of addictions to the ministry as they were starting out, the battle with depression, struggles with anger, difficulty focusing, their insecurity

in relationships, their lack of understanding at times of what is “normal,” a lack of self-awareness, and wishing they had not been there.

Through the literature, through the interviews, and through the scales, we also learned that many, if not most, of these pastors were impacted by the problems with conflict avoidance, people pleasing or unhealthy perfectionistic strivings; aftershocks of the earthquakes they had suffered, damaging default echoes that keep ringing in their ears.

Through the literature, we also learned there are variables that affect how much damage is done. We have explored a number of these in this project. Gender, age, kind of alcoholic, involvement in outside activities, emotional nurture by the non-alcoholic spouse, emotional support from those outside the home, and different roles children assume in the home are a number of the variables we examined. These variables did play a role in mitigating the effect for a number of the pastors as was clear from the results of the scales and the interview process.

The greatest variable, however, and the one that these pastors kept coming back to again and again, was Jesus. Their faith in Christ provided them with an anchor that held. For some, it was through the crisis, while for others, it became the means of making sense of the crisis after the fact.

Over and over, their testimony was clear. Listen for yourself to their own words. Pastor R struggled early on thinking, “It wasn’t fair. My dad robbed me of my childhood.” But then she added, “God told me I wouldn’t be where I was with the Lord, if it wasn’t for my past.” She further noted, “It molded me to make me who I am. It has shaped me in everything I do . . . preaching, teaching mothering, counseling, and

marriage.” She concluded, “Out of the bad, good came out.” Pastor H agreed, “I’m definitely better for it. I’ve seen good come out of it. God has turned it for good. It’s allowed me to face negative circumstances and see God get me through to develop me.” Other pastors echoed similar thoughts, “I know that God can change a life and the guilt of the past can be removed,” and “I had a strong feeling that God could overwhelm the circumstances of life.”

Pastor S, in a very moving moment, shared with me how difficult it was for her to go to her father’s funeral in light of the massive neglect she suffered at his hands. The Lord spoke to her at the funeral and said, “I used this man to give you physical life so I could give you spiritual life.” At that instant, by the casket, she said she was able to forgive him and move on in life.

Pastor Y, one of the pastors who suffered an incredible amount of abuse and neglect growing up, testified that “I have been able to understand grace and mercy.” He added that God “is using our todays to shape us for our tomorrows and it’s all part of the process.” Pastor L confirms that “growing up like I did helped me. I’ve been able to learn from everything and apply God’s Word. I’ve been able to use the positives and the negatives as learning tools in ministry to people.” Pastor K simply declares, “God has helped me to overcome.” Pastor S asserts, “It has made me a better person. It’s made me stronger. Ten years ago, I couldn’t have seen it but the older I get, I can see it more positively. I’m becoming more optimistic.”

Pastor M pointed out how it has affected his fathering. He made it a point to pour his life into his girls and to raise them in a home without the drinking and yelling that he knew.

Perhaps Pastor F, the oldest pastor in the sample, sums it up best from eight decades of learning and a lifetime of watching God work when he declares, “Nothing happens by chance. God gave me the dad he did. I used to look at my home and childhood and it was dark and foreboding. Now I see this point. The huge amount of deficiencies caused me to depend upon the Lord more than those who didn't have such a life.” He concludes by noting, “In God's plan, God is more interested in the final product than the process we go through. It has enriched my life, but painfully. That's the wonderful part of the grace of God.”

In laying out the problem in chapter one, exploring the biblical and theological underpinnings in chapter two, examining and interacting with the literature in chapter three, and in developing the testing instruments, executing the project and analyzing the data in chapters four and five, we are now able to conclude that for these twenty-six pastors, part of the group of pastors in the New York District of the Assemblies of God who returned the initial screening instrument, the thesis holds. For this group, there is enough evidence, I believe, to support the fact that growing up in a home with an alcoholic parent(s) has resulted in developing common positive and negative characteristics that affect pastoral leadership.

We must be quick to point out that there are limitations to this project. First of all, this project was based upon self-reporting by the pastors. There is always the possibility of a skewed perspective when it is not able to be challenged or confirmed by additional sources. Several of the pastors did suggest that it would be helpful to get their spouse's perspective on things, which I think would be a wonderful idea.

A second limitation is that the self-report is also based upon retrospective memories, some from six or seven decades ago. Sometimes, perhaps more often than we are willing to admit, our memories of the past may be colored. Such could certainly have been the case here.

A third limitation has to do with the sample. It was overwhelmingly Caucasian (96%) and American, predominantly male (73%), and from one denomination (the Assemblies of God). Most of the participants were middle class, highly educated, and an average age in the 50's. Other racial groups, nationalities, denominations, socio-economic and educational groups may have different results. A younger age group and a sample with greater balance in gender may make a difference as well.

Finally, although we made use of some standardized testing instruments with permission, this was not a social science experiment, adhering to the rigors of empirical research. Although I worked hard to avoid contamination of the results, I am not trained as a social scientist or psychologist. I examined the variables individually as they related to the CAST scores but lacked the ability to investigate how they interacted with each other. Empirical methods beyond my training would need to be implemented.

Also, there were no control groups of pastors who were raised in homes without an alcoholic parent with which to compare our results. I believe I can, with a strong degree of certainty, however, suggest that the results can be extended beyond this group but without empirical research to back up this study, I cannot do so conclusively.

This brings us to a direction for future studies. I would hope this project will serve as preliminary research that will be tested cross-denominationally, with control

groups and other necessary measures to isolate variables, so that the results can be supported empirically, leading to future advancements in the field.

Through my research, I discovered a plethora of information for and about adult children of alcoholics. Unfortunately, there is a dearth of material regarding pastors who, themselves, were raised in homes with an alcoholic parent. This project is one attempt to remedy the situation. I hope that it will generate interest in the field and serve as a wakeup call to the scientific and religious communities to investigate this forgotten group of people who, week in and week out, do their best to preach, minister, and care for hundreds and thousands of people, while at the same time, doing so through their own childhood hurts and struggles. In some small way, may this project launch a field of study, the development of resources and the establishment of a network of support for these wounded warriors that will assist and encourage them in their personal life and in fulfilling their high and holy calling as spiritually and emotionally healthy ministers of the gospel.

In the meantime, let me suggest a few practical steps that can be taken now by denominational leaders and institutions of Christian higher education to be part of the solution. I graduated summa cum laude from college with a bachelor's degree. I went through the licensing and ordination procedures of my denomination. I returned to school and obtained a Master of Divinity degree, again graduating summa cum laude, while participating in supervised ministry, field education, and counseling coursework along the way. I have been pastoring for over twenty years. I was a presbyter responsible for screening pastoral candidates for the ministry for over six years. Throughout that whole process, I never recall being intentionally or directly asked

whether my father was an alcoholic. It was not until I started doctoral studies and this project that I even considered that possibility and, yet, the experience had colored my life and ministry the whole time.

If the statistics are accurate, then a minimum of 10% of the population grew up in alcoholic homes. Minimally, one in 10 pastors is an ACOA. In our study, it was one in six. Consider what damage can occur through the multiplication effect in replicating one's dysfunctional family of origin in the church and you understand why I am passionate about helping this group of pastors. I know, I was one of them, and even though I was sincere and, by external measures, successful, I damaged people. I hurt those I was called to help. I may have done it out of ignorance but it does not negate the damage.

By God's grace, I was given a new beginning at the church where I serve, another chance to get it right, so to speak, and to shepherd the flock towards green healthy pastures where the Lord can feed and nourish them. I have pastored this church both ways . . . in my brokenness and, over the last couple of years, in my becoming new. I never want to go back. Not every pastor has the chance I have had at new beginnings but I want to be part of a renewal and restoration movement that helps ACOA pastors start over and/or get it right from the beginning.

Somehow, through the educational process and through our licensing and ordination procedures, the tough questions have to be asked, not just Doctrine 101 questions, as important as a sound theology is, but questions about formation, spiritual and emotional health, including questions about the pastor's family of origin.

Scazzerro's book on the emotionally healthy church should be required reading for all prospective pastors and the spiritual and emotional inventory needs to be mandatory too, along with any other helpful instruments out there that develop a sense of self-awareness (such as those utilized in this project). Williams' book on healing the dysfunctional church and Cosgrove and Hatfield's work on church conflict, utilizing family systems theory, ought to be required as well. A genogram that investigates families of origin at least three generations back is a must for every potential pastor in order to explore familiar patterns of dysfunction as well as healthy patterns upon which to build.

Finally, the development of a network of ACOA pastors who, themselves, have progressed in their healing and who can develop and lead small groups for other ACOA pastors, would also be a healthy step in the right direction. Those pastors who have already walked the ACOA road would be in a better place to assist younger pastors who grew up in alcoholic homes deal with the unique challenges of being an adult child of an alcoholic in the ministry.

The training, teaching and ministering to these ACOA pastors, by the way, must be grounded in the Word, based on sound psychological principles and lived out in the context of community. We may be saved individually but we are sanctified corporately, in the context of community. Without a loving, safe, confidential and healthy environment to come to, most ACOA pastors will not participate and the unhealthy and ungodly patterns will continue to be promulgated for another generation. It cannot be. It does not have to be.

With this chapter, we have reached the end of the project but not the end of the journey, for it is my hope that this project will indeed be able to serve the kingdom. Over the course of the last several years, in pursuit of my degree in general, and this project in particular, I have had the opportunity to read thousands of pages of material on the subject and sought to digest it. I have grappled with the theological and biblical foundations for this study. I have also had the privilege of sitting down with twenty-six wonderful and gracious human beings who willingly shared their lives and stories with me.

I know I have been changed in the process, for the stories that were shared with me by these pastors have resonated well with my own experience growing up in a home where alcohol was abused. I have come to see through this journey that I am not alone. In all of my fears and anxiety as a child, wondering if my dad would come home drunk, the Lord was there, holding me and carrying me through. I have discovered, as well, fellow sufferers, other wounded healers with whom I have connected through the process and with whom I have developed friendships that will endure beyond this project.

Perhaps, through it all, what I have learned the most is that alcoholism in our families may have shaped us, but it does not have to define us. It may have affected us, but it does not have to control us. It marred our pasts but it does not have to have the power to destroy our futures. Redemption and restoration are possible for those willing to allow God to bring healing.

The process of healing, however, will take time. It will require honesty, brutal honesty, in the context of a loving and safe community. There are no solo healings as

much as we would like to believe there are. It will be, at times, a very painful process and will require patience and perseverance but the process will be worth it.

To begin moving towards authenticity, learning to operate in a love rooted in truth for the glory of God, has been the most amazing and liberating experience; not only for me as a pastor, but also for the congregation that I serve. The community of faith, of which I am a part, is beginning to learn how to function as a family, not a dysfunctional family as in the past, replicating my family of origin. No, it is slowly starting to reflect the family of God, a beautiful, real, diverse, body of believers, committed to serving and loving God and each other for His glory.

I believe the healing that we are experiencing is not unique but is God's heart for other pastors who are ACOA, as well as for the churches they serve. The five characteristics we explored and examined through this project could be redeemed by so many others and, ultimately, provide a much greater backdrop for God's power and grace to be manifested through jars of clay.

Perhaps, some day, other pastors will eventually be able to respond, as the many pastors interviewed for this project and I can now do, by genuinely giving thanks for the life they were granted and the experiences that they endured growing up in an alcoholic home. I know I stand in wonder at how it is all working out according to his divine plan for his glory and for my good after all. With confidence and assurance, I can now experientially acknowledge the truth the apostle Paul declares in 2 Corinthians 1:3-5:

Praise be the God and Father of our Lord Jesus Christ, the Father of compassion and the God of all comfort, who comforts us in all our troubles, so that we can comfort those in any trouble with the comfort we ourselves have received from God. For just as the sufferings of Christ flow over into our lives, so also through Christ our comfort overflows.

Appendix A
Thirteen Characteristics of Adult Children of Alcoholics²⁵⁸
(Janet Woititz)

1. Adult children of alcoholics guess at what normal is.
2. Adult children of alcoholics have difficulty following a project through from beginning to end.
3. Adult children of alcoholics lie when it would be just as easy to tell the truth.
4. Adult children of alcoholics judge themselves without mercy.
5. Adult children of alcoholics have difficulty having fun.
6. Adult children of alcoholics take themselves very seriously.
7. Adult children of alcoholics have difficulty with intimate relationships.
8. Adult children of alcoholics overreact to changes over which they have no control.
9. Adult children of alcoholics constantly seek approval and affirmation.
10. Adult children of alcoholics usually feel different from other people.
11. Adult children of alcoholics are super responsible or super irresponsible.
12. Adult children of alcoholics are extremely loyal, even in the face of evidence that the loyalty is undeserved.
13. Adult children of alcoholics are impulsive. They tend to lock themselves into a course of action without giving serious consideration to alternative behaviors or possible consequences. This impulsivity leads to confusion, self-loathing, and loss of control over their environment. In addition, they spend an excessive amount of energy cleaning up the mess. As a result, more energy is spent cleaning up the mess than would have been spent had the alternatives and consequences been examined in the first place.

258. Janet G. Woititz, *Adult Children of Alcoholics* (Deerfield Beach, FL: Health Communications, Inc., 1983), 104-105.

Appendix B

Initial Screening Instrument

Name: _____
 Address: _____
 E-mail Address: _____
 Telephone #: _____ Date of Birth: _____
 Level of ministerial credential: _____
 Date credentialed: _____
 Place of ministry: _____
 Position in ministry: _____
 Number of years in present ministry position: _____

	YES	NO	
			Did either of your parents drink alcohol of any kind? (check yes or no) <i>*If yes, please answer questions 1-31. They are designed to evaluate your feelings, behavior and experiences related to a parent's alcohol use. Please take your time and answer every question.</i> <i>* If no, don't answer any other questions but please still return form.</i>
1.			Have you ever thought that one of your parents had a drinking problem? _____
2.			Have you ever lost sleep because of a parent's drinking? _____
3.			Did you ever encourage one of your parents to quit drinking? _____
4.			Did you ever feel alone, scared, nervous, angry or frustrated because a parent was not able to stop drinking? _____
5.			Did you ever argue or fight with a parent when he or she was drinking? _____
6.			Did you ever threaten to run away from home because of a parent's drinking? _____
7.			Has a parent ever yelled at or hit you or other family members when drinking? _____
8.			Have you ever heard your parents fight when one of them was drunk? _____
9.			Did you ever protect another family member from a parent who was drinking? _____
10.			Did you ever feel like hiding or emptying a parent's bottle of liquor? _____
11.			Do many of your thoughts revolve around a problem-drinking parent or difficulties that arise because of his or her drinking? _____
12.			Did you ever wish that a parent would stop drinking? _____
13.			Did you ever feel responsible for or guilty about a parent's drinking? _____

YES NO

14.		Did you ever fear that your parents would get divorced due to alcohol misuse?
15.		Have you ever withdrawn from and avoided outside activities and friends because of embarrassment and shame over a parent's drinking problem?
16.		Did you ever feel caught in the middle of an argument or fight between a problem-drinking parent and your other parent?
17.		Did you ever feel that you made a parent drink alcohol?
18.		Have you ever felt that a problem-drinking parent did not really love you?
19.		Did you ever resent a parent's drinking?
20.		Have you ever worried about a parent's health because of his or her alcohol use?
21.		Have you ever been blamed for a parent's drinking?
22.		Did you ever think your father was an alcoholic?
23.		Did you ever wish your home could be more like the homes of your friends who did not have a parent with a drinking problem?
24.		Did a parent ever make promises to you that he or she did not keep because of drinking?
25.		Did you ever think your mother was an alcoholic?
26.		Did you ever wish that you could talk to someone who could understand and help the alcohol-related problems in your family?
27.		Did you ever fight with your brothers and sisters about a parent's drinking?
28.		Did you ever stay away from home to avoid the drinking parent or your other parent's reaction to the drinking?
29.		Have you ever felt sick, cried, or had a "knot" in your stomach after worrying about a parent's drinking?
30.		Did you ever take over any chores and duties at home that were usually done by a parent before he or she developed a drinking problem?
31.		If you meet the criteria for the research project, would you be interested in participating in the second phase of the study (semi-structured interview of no more than 45 minutes)?

*Thank you for your participation in this survey.
Please return to Pastor Ray Richards in the attached envelope within two weeks.*

Appendix C Cover Letter

September 2006

Dear Credential Holder:

As a fellow credential holder, I know that your time is valuable and that many worthy projects clamor for your attention. I am asking for just 15 minutes out of your busy schedule to assist me in a project that will be of benefit to you, your ministry and the churches of our New York District.

I am working on a research project for a doctoral thesis that is investigating the link between growing up in a home where alcohol was present and its effect on pastoral ministry. Specifically, my thesis is that there are common characteristics (both positive and negative) of adult children of alcoholics that impact pastoral leadership.

I hope to test this thesis through a two-step process among the credential holders in the New York District of the Assemblies of God. The first step consists of an initial two-page survey that is being sent to every credential holder in the state. This brief survey will take less than fifteen minutes to complete. My request is that you take a few moments right now and complete the attached survey and send it back in the self-addressed envelope. The higher the return rate on this initial survey, the more beneficial will be the results for the project. For those with internet access, you may choose instead to complete the confidential survey on-line by going to our church's website at <http://www.cagcobleskill.org>, hitting the D-Min Survey link on the left side of the web page and following the directions. All results from this district-wide survey will be tabulated together for statistical analysis and your confidentiality is assured.

This initial survey will then be followed up by a second phase of the project for those who meet the criteria and who wish to participate further in the project. This second phase consists of a semi-structured interview of no more than forty-five minutes.

If you have any questions or would like further information, you may contact me at the number/address above or by e-mail at pastorray@cagcobleskill.org. Thank you in advance (and in faith!) for your willingness to participate in this project. May God bless you.

In Service to the King,

Raymond A. Richards
Pastor, Calvary Assembly of God

Appendix D

Semi-structured Interview Part One Questionnaire

Code #:

Date:

Gender:

Thank you for your willingness to participate in this interview. The purpose of this study is to investigate the link between growing up in a home where alcohol was present and any possible effect on pastoral ministry (both positive and negative). Your answers will be tabulated along with the other interviewees for analysis. A coding system is being utilized to assure your confidentiality throughout the process.

This interview is divided into two parts. In the first part, I will be asking you a number of questions about your childhood, your family, your call and your ministry. Some of the questions will be able to be answered with a simple yes or no or by a short answer. Others will require you to choose from several options. Finally, there will be some questions that will draw from your experience, perceptions, memories and feelings. The second part of the interview will consist of another set of questions that you will be able to read on your own and then answer based upon scales or multiple-choice options. If you require clarification about any of the questions today, please ask.

✓ **Confirm biographical information from initial screening forms**

✓ **Obtain permission to tape**

With your permission, I would like to tape record the interview so as to assure the accuracy of your responses.

Permission Granted: *Yes* *No*

✓ **Have individual sign confidentiality/consent form for research/analysis**

Let me begin first today by asking you a number of questions related to your spiritual pilgrimage.

Briefly share with me how you came to know Christ and how he has changed your life:

When and how did you sense God's call into the ministry? _____

Now, let's move on to some general questions related to your childhood and family of origin.

Where do you come in the birth order in your family?

Only child First Born Second Born Third Born Youngest child
Other: _____

Number of siblings & type (i.e. brother, sister, step-sister, etc.)

How would you rate your academic success as a child/teen compared to other children/teens?

A's A's and B's B's B's and C's C's C's and D's F's

Highest level of education:

High School Some College College Degree Master's Degree
Doctorate Other: _____

Please read the paragraphs on the sheet that I'm giving you and indicate the one that most closely describes how you remember yourself as a child (hand sheet with statements to the interviewee):

_____ *I was a very responsible child. I often helped out around the house with chores, babysitting my siblings, cooking, etc. I was very organized and a leader at school. I excelled at academics, sports or other activities. My parents were very proud of me and praised my achievements.*

_____ *I was often in trouble at home or school and sometimes with the law. I didn't seem to be able to do anything right and my parents were often mad at me. I may have gotten into drinking or drug use at a young age, dropped out of school, got a girl pregnant (or, if a girl, became pregnant) or gotten married to get out of my parent's house as quickly as I could.*

_____ *I tried not to be noticed. I really didn't want any kind of attention whether it was positive or negative. I was very quiet and spent much time in my room reading or playing by myself I may have daydreamed a lot, fantasized or even had imaginary friends. My grades were average and I was not a leader at school. I tried not to be a bother to anyone.*

_____ *I liked being the center of attention. I was funny, charming and popular. My classmates often called me the class clown. I could laugh harder or cry louder than most people at home and I could be counted on to something funny or clumsy to make people laugh when things were tense.*

_____ *None of these paragraphs closely describes me as a child*

Did you have any adults outside the home with whom you could talk about what you were going through at home and who provided you with emotional support and help?

Yes No

Which of the following activities did you participate in as a child?

<input type="checkbox"/> sports teams	<input type="checkbox"/> church
<input type="checkbox"/> music, drama, etc.	<input type="checkbox"/> youth group
<input type="checkbox"/> clubs, scouting, etc.	<input type="checkbox"/> other

How helpful were these activities to you in coping with your parent's problem-drinking on a scale from 1 to 10 with 1 being "not helpful at all" and 10 being "extremely helpful"?

<input type="checkbox"/> sports teams	<input type="checkbox"/> church
<input type="checkbox"/> music, drama, etc.	<input type="checkbox"/> youth group
<input type="checkbox"/> clubs, scouting, etc.	<input type="checkbox"/> other

What personal strengths do you think you have because you grew up in your family?

Let's turn our attention now to some questions related to the alcohol use in the family.

Which parent was the problem-drinking parent?

Father (Stepfather) Mother (Stepmother) Both

How frequently did your problem-drinking parent(s) drink alcohol?

Daily Several times a week Weekly Several times a month
Monthly Other: _____

What was your age when your parent(s) began drinking? _____

Did your parent(s) ever stop drinking? *Yes No*

(If yes) How old were you when he/she stopped? _____

How did he(she) act when drinking? _____

How did he(she) act when not drinking? _____

In what ways did you react to your parent when he/she drank (e.g. what did you feel and do, etc.)? _____

Many families develop a number of family traditions they do year after year. Some of these relate to holiday celebrations while others may have to do with other family rituals (e.g. special vacation place, nighttime routines, family nights etc.). What family traditions, holiday celebrations, rituals, etc. do you recall experiencing when you were a child?

Did your parent's drinking ever interfere with any of the traditions, rituals and celebrations mentioned above? *Yes* *No*

(If yes) Please give a specific example of such an interference: _____

In what ways did growing up in a home with a problem-drinking parent prepare you for the ministry in which you currently serve? _____

Please list any areas in which you believe your life or ministry has been hindered by growing up in a home where alcohol was abused? _____

OK, I want to take a few minutes to ask some questions dealing with relationships in your family as you were growing up.

What level of emotional closeness did you feel with your parent(s) who drank? *Very close*
Close Somewhat Close Not Close Distant

What level of emotional closeness did you feel with your non-drinking parent? *Very close*
Close Somewhat Close Not Close Distant

In general, describe how conflict was handled in your home growing up (*answers below for my purpose only*).

_____ <i>withdrew</i>	_____ <i>hitting, kicking, biting, etc.</i>
_____ <i>yield or give in</i>	_____ <i>compromised</i>
_____ <i>used humor</i>	_____ <i>passively aggressive response</i>
_____ <i>used sarcasm or name-calling</i>	_____ <i>other (list _____)</i>
_____ <i>tried to be a peacemaker</i>	_____
_____ <i>it was resolved in a healthy way</i>	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

How would you describe the relationship your parents had with each other when you were a child? _____

Did your parents ever divorce? *Yes No*

(If yes) **How old were you?** _____

(If yes) **What did they give as the reason(s) for the divorce?** _____

(If yes) **Did your parent(s) remarry?** *Yes (Mother Father Both) No*

All right, just a few more questions to go in Part 1 of this interview. These questions deal primarily with your ministry today.

Have people commented to you about your ability to empathize with them in their struggles? *Yes No*

(If yes) **What have they said?** _____

Perfectionism is defined as a personal standard, attitude, or philosophy that demands perfection or a tendency to set high standards of personal performance with a disposition to feel that anything less than perfect is unacceptable.

Using a scale of 1-5, with 1 being not at all and 5 being definitely, would you classify yourself as a perfectionist according to this definition? _____

Have people commented to you about your ability to “read” people and situations?
Yes No

(If yes) **What have they said?** _____

When conflict has occurred in your ministry how have you handled it:

Have you ever sought out and/or received professional help for any issues related to your parent’s problem-drinking? *Yes No*

Are there any other comments regarding your experience you would like to make that were not covered by this initial set of questions?

Appendix E

Interpretation Guide: Levels of Emotional Maturity²⁵⁹

Emotional infant. Like a physical infant, I look for other people to take care of me more than I look to care for them. I often have difficulty in describing and experiencing my feelings in healthy ways and rarely enter the emotional world of others. I am consistently driven by a need for instant gratification, often using others as objects to meet my needs, and am unaware of how my behavior is effecting/hurting them. People sometimes perceive me as inconsiderate, insensitive, and self-centered.

Emotional children. Like a physical child, when life is going my way and I am receiving all the things I want and need, I am content and seem emotionally well-adjusted. However, as soon as disappointment, stress, tragedy, or anger enter the picture, I quickly unravel inside. I interpret disagreements as a personal offense and am easily hurt by others. When I don't get my way, I often complain, throw an emotional tantrum, withdraw, manipulate, drag my feet, become sarcastic, or take revenge. I have difficulty calmly discussing with others what I want and expect from them in a mature loving way.

Emotional adolescents. Like a physical adolescent, I know the right ways I should behave in order to “fit in” mature, adult society. I can feel threatened and alarmed inside when I am offered constructive criticism, quickly becoming defensive. I subconsciously keep records on the love I give out, so I can ask for something in return at a later time. When I am in conflict, I might admit some fault in the matter, but I will insist on demonstrating the guilt of the other party, proving why they are more to blame. Because of my commitment to self-survival, I have trouble really listening to another person's pain, disappointments, or needs without becoming preoccupied with myself.

Emotional adults. I can respect and love others without having to change them or becoming critical and judgmental. I don't expect anyone to be perfect in meeting my relational needs, whether it be my spouse, parents, friends, boss, or pastor. I love and appreciate people for who they are as whole individuals, the good and the bad, and not for what they can give me or how they behave. I take responsibility for my own thoughts, feelings, goals, and actions. When under stress, I don't fall into a victim mentality of a blame game. I can state my own beliefs and values to those who disagree with me -- without becoming adversarial. I am able to accurately self-assess my limits, strengths, and weaknesses and freely discuss them with others. Deeply in tune with my own emotions and feelings, I can move into the emotional worlds of others, meeting them at the place of their feelings, needs, and concerns. I am deeply convinced that I am absolutely loved by Christ, that I have nothing to prove.

259. Peter Scazzero with Warren Bird, *The Emotionally Healthy Church: A Strategy For Discipleship That Actually Changes Lives* (Grand Rapids, MI: Zondervan, 2003), 66.

Appendix F

Consent Form

Description of the research and your participation

You are invited to participate in a research study/thesis-project conducted by Raymond A. Richards, a doctoral ministry student at Gordon-Conwell Theological Seminary. The purpose of this research is to investigate the link between growing up in a home where alcohol was present and any possible effect on pastoral ministry (both positive and negative). Your participation will involve taking part in an interview of approximately one hour in which you will be asked to answer questions related to your childhood experiences, your family, your call to ministry and your involvement in the ministry itself.

Risks and discomforts

There may be certain risks or discomforts associated with this research as it could trigger some painful memories and emotions. Some of the questions will be sensitive in nature.

Voluntary participation

Your participation in this research study is voluntary. You are free not to answer any question that is uncomfortable for you. You may choose not to participate and you may withdraw your consent to participate at any time. You will not be penalized in any way should you decide not to participate or to withdraw from this study.

Potential benefits

By your involvement, you may provide valuable information that could be of assistance to other pastors who were raised in homes where alcohol was present. The research may also be of assistance to the greater body of Christ. You, yourself, may also benefit through the process by reflecting on your own experiences. Finally, you will assist Raymond A. Richards in partially fulfilling his requirements for the Doctor of Ministry degree at Gordon-Conwell Theological Seminary.

Protection of Confidentiality

We will do everything we can to protect your privacy. A coding system is being utilized to assure your confidentiality. Your answers will be tabulated along with the other participants for analysis and the results included in aggregated form in the final thesis. Your identity will not be revealed in any publication that might result from this study.

Contact information

If you have any questions or concerns about this study or if any problems arise, please contact Dr. Kenneth Swetland at Gordon-Conwell Theological Seminary (978-468-7111).

Consent

I have read this consent form and have been given the opportunity to ask questions. I give my consent to participate in this study.

Participant's signature: _____ Date: _____

A copy of this consent form should be given to you.

Appendix G

Tables - Screening, Interview and Inventory Results

Table 1 - Comparison of Children of Alcoholics Screening Test (CAST) Scores to Gender of Parent and of the Pastor

Pastor's ID	CAST Score	Gender of Pastor	Alcoholic Parent	Pastor's ID	CAST Score	Gender of Pastor	Alcoholic Parent
A	6	F	Dad	O	18	M	Dad
			Mom	P	19	M	Dad
B	7	M	Dad	Q	20	M	Dad
C	8	M	Dad	R	20	F	Dad
D	10	M	Dad	S	20	F	Dad
E	10	M	Dad	T	20	M	Dad
F	11	M	Dad				Mom
G	11	M	Dad	U	20	M	Dad
H	12	M	Dad	V	21	F	Mom
			Mom	W	22	M	Dad
I	13	M	Dad				Mom
J	13	M	Dad	X	22	F	Dad
K	14	F	Dad	Y	23	M	Dad
L	16	F	Dad	Z	23	M	Dad
M	17	M	Dad				Mom
N	17	M	Dad				Stepfather

Note: When both parents (or a stepparent) drank, each is included.

Table 2 - CAST Comparison to Child's Age at Start of Drinking and Its Cessation

Pastor's ID	CAST Score	Child's Age When It Started	Did Drinking Stop	Pastor's ID	CAST Score	Child's Age When It Started	Did Drinking Stop
A	6	10 years old - M	No Stop	O	18	Before Birth	Yes
		10 years old - D	No Stop	P	19	Before Birth	No Stop
B	7	Before Birth	Yes	Q	20	6 years old	No Stop
C	8	Before Birth	Yes	R	20	Before Birth	Went Back
D	10	Before Birth	No Stop	S	20	Before Birth	No Stop
E	10	Don't Know	Yes	T	20	Before Birth - M	Yes
F	11	Before Birth	Yes			Before Birth - D	Yes
G	11	Don't Know	Yes	U	20	Before Birth	No Stop
H	12	Before Birth - M	Yes	V	21	7-8 years old	Yes
		Before Birth - D	Yes	W	22	Before Birth	Yes
I	13	Before Birth	Yes			Before Birth	Yes
J	13	Before Birth	Yes	X	22	Before Birth	Yes
K	14	Before Birth	Yes	Y	23	Before Birth	Went Back
L	16	13 years old	Yes	Z	23	Before Birth - D	Went Back
M	17	Before	Yes			5 years old - M	Yes-illness
N	17	Before	Yes			Don't Know - SF	No Stop

Key: M = Mom D = Dad SF = Stepfather

Went Back = Ceased drinking for extended period but then started drinking again

Table 3 - Comparison of CAST Scores with Drinking Frequency

Pastor's ID	CAST Score	Drinking Frequency	Pastor's ID	CAST Score	Drinking Frequency
A	6	Weekly - Mom	O	18	Daily
		Weekly - Dad	P	19	Daily
B	7	Daily	Q	20	Several Times a Week
C	8	Weekly	R	20	Daily
D	10	Daily	S	20	Daily
E	10	Daily	T	20	Weekly - Mom
F	11	Weekly			Dad - Unknown
G	11	Several Times a Week	U	20	Daily
H	12	Several Times a Week	V	21	Daily
		Mom - Unknown	W	22	Daily - Dad
I	13	Monthly/Every Other Month			Daily - Mom
J	13	Several Times a Month	X	22	Daily
K	14	Weekly	Y	23	Daily
L	16	Daily	Z	23	Weekly - Mom
M	17	Weekly			Daily - Dad
N	17	Several Times a Week			Daily - Stepdad

Note: Both Pastors I and J indicated their fathers were binge style drinkers.

Table 4 - Comparison of CAST Scores and Parents' Divorce

Pastor's ID #	CAST Score	Parents Divorced	Pastor's ID #	CAST Score	Parents Divorced
A	6	No	N	17	Yes
B	7	No	O	18	No
C	8	Yes	P	19	Yes
D	10	Yes	Q	20	No
E	10	No	R	20	Yes
F	11	No	S	20	No
G	11	Yes	T	20	Yes
H	12	No	U	20	No
I	13	No	V	21	Separated
J	13	No	W	22	No
K	14	No	X	22	No
L	16	No	Y	23	Yes
M	17	No	Z	23	Yes

Table 5 - Comparison of CAST Scores with Disruption of Holiday Celebrations

Pastor's ID	CAST Score	Holiday Traditions	Pastor's ID	CAST Score	Holiday Traditions
A	6	No	N	17	Don't Know
B	7	Don't Know	O	18	Not usually
C	8	No	P	19	No
D	10	Yes	Q	20	Yes
E	10	No	R	20	Don't Know
F	11	No Tradition	S	20	Yes
G	11	No	T	20	Yes
H	12	Yes	U	20	No
I	13	Yes	V	21	No
J	13	Yes	W	22	Yes
K	14	Yes	X	22	Yes
L	16	No	Y	23	No
M	17	Yes	Z	23	Yes

Table 6 - CAST Comparison with Emotional Support of Non-Drinking Parent

Pastor's ID	CAST Score	Close to Non-Drinker	Pastor's ID	CAST Score	Close to Non-Drinker
A	6	XXX*	O	18	Somewhat close
		XXX	P	19	Close
B	7	Very close	Q	20	Very close
C	8	Very close	R	20	Very close
D	10	Very close	S	20	Distant
E	10	Not close	T	20	XXX
F	11	Very close			XXX
G	11	Very close	U	20	Very close
H	12	XXX	V	21	Distant
		XXX	W	22	XXX
I	13	Close			XXX
J	13	Very close	X	22	Not close
K	14	Close	Y	23	Close
L	16	Close	Z	23	XXX
M	17	Very close			XXX
N	17	Very close			XXX^

Note: Since we are only comparing the emotional closeness ACOA had with a non-drinking parent, any minister with both parents who are alcoholics would be excluded by definition from this statistic.

*XXX = both parents were alcoholics ^ = stepfather was an alcoholic

Table 7 - Comparison of CAST Scores With Kind of Parental Drinker

Pastor's ID	CAST Score	Act When Drinking	Pastor's ID	CAST Score	Act When Drinking
A	6	Carefree – Dad	O	18	Other
		Carefree – Mom	P	19	Belligerent
B	7	Passive	Q	20	Belligerent
C	8	Belligerent	R	20	Offensive
D	10	Carefree	S	20	Passive
E	10	Belligerent	T	20	Passive – Dad
F	11	Offensive			Belligerent – Mom
G	11	Carefree	U	20	Passive
H	12	Carefree – Dad	V	21	Offensive
		Other – Mom	W	22	Belligerent – Mom
I	13	Belligerent			Carefree – Dad
J	13	Belligerent	X	22	Passive
K	14	Belligerent	Y	23	Offensive
L	16	Passive	Z	23	Belligerent – Dad
M	17	Carefree			Carefree – Mom
N	17	Offensive			Offensive – Stepfather

Note: Carefree = happy, jovial, outgoing, goofy

Belligerent = verbally mean

Offensive = range from embarrassment to physical and/or sexual abuse

Passive = quite, reclusive, wimpy

Other = No change, not otherwise specified

Table 8 - Inventory #2 Results Children's Role Inventory - Potter)

Pastor's ID	Children's Role	Pastor's ID	Children's Role
A	Hero	N	Hero
B	Mascot	O	Mascot
C	Hero	P	Hero
D	Mascot	Q	Mascot
E	Mascot	R	Mascot
F	Mascot	S	Lost Child
G	Hero	T	Lost Child
H	Hero	U	Hero
I	Lost Child	V	Mascot
J	Hero	W	Hero
K	Hero	X	Hero
L	Mascot	Y	Mascot
M	Lost Child	Z	Hero/Mascot

Note: Pastor Z scored equally on the hero and mascot scales.

Table 9 - Children's Roles (Based on Self-report from Interview)

Pastor's ID	Self-Report Interview	Pastor's ID	Self-Report Interview
A	Lost Child	N	None
B	Hero to Scapegoat	O	Lost Child/Mascot
C	Hero/Little Mascot	P	Hero
D	Mascot	Q	Hero
E	Mascot	R	Hero
F	Scapegoat to Mascot	S	Lost Child
G	Hero	T	Lost Child to Hero
H	Lost Child	U	Hero to Scapegoat
I	Lost Child	V	Hero/Mascot
J	Hero/Lost Child	W	Lost Child/Mascot
K	Hero	X	Hero/Mascot
L	Hero	Y	Mascot
M	Hero/Lost Child	Z	Mascot/Little Hero

Key:

Where two roles are included for a pastor, it denotes either he or she identified with characteristics of more than one role (this is indicated with a “/”) or that their role changed in the home over time (this is indicated with a “to”)

Table 10 - Comparison of Children's Roles with CRI and Self-Report Interview

Pastor's ID	Children's Role Invent.	Self-Report Interview	Pastor's ID	Children's Role Invent.	Self-Report Interview
A	Hero	Lost Child	N	Hero	None
B	Mascot	Hero to Scapegoat	O	Mascot	Lost Child/Mascot
C	Hero	Hero/Little Mascot	P	Hero	Hero
D	Mascot	Mascot	Q	Mascot	Hero
E	Mascot	Mascot	R	Mascot	Hero
F	Mascot	Scapegoat to Mascot	S	Lost Child	Lost Child
G	Hero	Hero	T	Lost Child	Lost Child to Hero
H	Lost Child	Lost Child	U	Hero	Hero to Scapegoat
I	Lost Child	Lost Child	V	Mascot	Hero/Mascot
J	Hero	Hero/Lost Child	W	Hero	Lost Child/Mascot
K	Hero	Hero	X	Hero	Hero/Mascot
L	Mascot	Hero	Y	Mascot	Mascot
M	Lost Child	Hero/Lost Child	Z	Hero/Mascot	Mascot/Little Hero

Table 11 - Comparison of CAST Scores With Outside Emotional Support

Pastor's ID	CAST Score	Other Support	Pastor's ID	CAST Score	Other Support
A	6	No	N	17	No Answer
B	7	Yes	O	18	No
C	8	Yes	P	19	No
D	10	No	Q	20	No
E	10	Yes	R	20	No
F	11	Yes	S	20	No
G	11	Yes	T	20	No
H	12	Yes	U	20	No
I	13	No	V	21	No
J	13	No	W	22	No
K	14	No	X	22	No
L	16	Yes	Y	23	Yes
M	17	No	Z	23	No

Table 12 - Inventory #1 Results (Scazzero - Inventory of Spiritual/Emotional Maturity)

Pastor's ID	Part A	Part B P1	Part B P2	Part B P3	Part B P4	Part B P5	Part B P6
A	A	EA	EA	A	EA	EA	A
B	A	A	A	A	EA	EA	A
C	A	EA	EA	A	EA	EA	A
D	EA	EC/EA	EA	EC/EA	EC	EC	EA/A
E	A/EA	EA	EA	EA	EC	EC	A
F	A	A	A	A	EA	A	A
G	EA	EA	EA	EA	EC	EA	EA
H	A	A	A	EA	EA	EC	EA
I	A	EA	EA/A	EA	EA	EA	EA
J	A	A	A	A	A	A	A
K	A	EA	EA	EA	EC	EC	EA
L	A	A	A	A	A	EA/A	A
M	A	A	EA	EA	EA	A	A
N	A	A	A	A	EA	A	A
O	EA	EA	EA	EA	EA	EC/EA	EA
P	EA	EC/EA	EA	EA	EC	EC	EC/EA
Q	A	EA	A	EA	EA	EA	A
R	A	A	A	A	A	A	A
S	A	A	A	A	EA	A	A
T	A/EA	EA	EA	A	EA	EC	A
U	A	A	A	A	EA	A	A
V	A	A	A	A	A	A	A
W	A	A	A	A	A	A	A
X	A	A	A	A	EA	A	A
Y	A	A	A	EA	EA/A	EA	A
Z	A	A	EA	EA/A	EA	EA	A

KEY:

Part A = General Formation and Discipleship Scale

Part B: P1 = Look Beneath the Surface Scale

Part B: P2 = Break the Power of the Past Scale

Part B: P3 = Live in Brokenness and Vulnerability Scale

Part B: P4 = Accept the Gift of Limits Scale

Part B: P5 = Embrace Grieving and Loss Scale

Part B: P6 = Make Incarnation Your Model For Loving Well Scale

A = Emotional Adult

A/EA = Borderline Adult/Adolescent

EA = Emotional Adolescent

EA/EC = Borderline Adolescent/Child

EC = Emotional Child

Table 13 - Inventory of Spiritual/Emotional Maturity - Comparison to Age

Age	Adult	Adult/ Adolescent	Adolescent	Adolescent/ Child	Child
30	3	0	3	1	0
33	0	1	2	2	2
33	3	0	4	0	0
44	0	0	6	0	1
44	6	0	1	0	0
44	3	1	3	0	0
45	0	0	3	2	2
45	1	0	4	0	2
45	0	0	6	1	0
46	6	0	1	0	0
47	3	0	4	0	0
47	7	0	0	0	0
49	7	0	0	0	0
50	2	1	3	0	1
52	5	0	2	0	0
53	4	0	3	0	0
54	6	0	1	0	0
54	1	1	5	0	0
55	7	0	0	0	0
59	1	1	3	0	2
61	7	0	0	0	0
61	3	0	4	0	0
63	4	1	2	0	0
72	6	0	1	0	0
77	6	1	0	0	0
81	6	0	1	0	0

Table 14 - Inventory of Spiritual/Emotional Maturity - Cumulative Scores

Pastor's ID	Adult	Adult/ Adolescent	Adolescent	Adolescent/ Child	Child
D	0	1	2	2	2
G	0	0	6	0	1
P	0	0	3	2	2
O	0	0	6	1	0
I	1	1	5	0	0
K	1	0	4	0	2
E	1	1	3	0	2
T	2	1	3	0	1
Z	3	1	3	0	0
Q	3	0	4	0	0
H	3	0	3	0	1
A	3	0	4	0	0
C	3	0	4	0	0
Y	4	1	2	0	0
M	4	0	3	0	0
B	5	0	2	0	0
N	6	0	1	0	0
U	6	0	1	0	0
X	6	0	1	0	0
F	6	0	1	0	0
L	6	1	0	0	0
S	6	0	1	0	0
V	7	0	0	0	0
J	7	0	0	0	0
W	7	0	0	0	0
R	7	0	0	0	0

Note: Pastors are ranked based upon the number of scales they scored in the adult stage of emotional development and range from 0 (no scales at all) to 7 (all scales in the adult category). The remaining scores across the range flow out of this initial ranking, rather than being ranked numerically.

Table 15 - Inventory #6 Results (Thomas-Kilmann Conflict-Mode Instrument)

Pastor's ID	Compete	Collaborate	Compromise	Avoid	Accommodate
A	Mid	Mid	Mid	Mid	High
B	Low	Low	Mid	Mid	High
C	Low	Mid	Mid	Mid	High
D	High	High	Low	Mid	Low
E	Low	Mid	Low	High	High
F	Low	Mid	Low	High	High
G	Mid	Low	Mid	Mid	High
H	Mid	Mid	Mid	High	Mid
I	High	Low	Mid	High	High
J	Low	Low	Low	High	High
K	Mid	Low	Mid	High	High
L	High	Low	Mid	High	High
M	Mid	High	High	Low	Low
N	Mid	High	Mid	Mid	Mid
O	Mid	Low	Mid	High	High
P	Mid	Mid	Low	High	High
Q	Mid	Low	Low	High	High
R	Low	Mid	Mid	High	Mid
S	Mid	Mid	Mid	Mid	High
T	Mid	Mid	Mid	High	Mid
U	Low	Low	Low	High	High
V	Low	Mid	Mid	Low	High
W	Low	Mid	Mid	High	High
X	Low	Low	Mid	High	Mid
Y	Low	Mid	Mid	Low	Mid
Z	Low	Mid	Low	High	High

Note: Scores for this instrument are compared to norms and ranked in one of three areas: high, middle or low. The higher the score, the greater the propensity towards and comfort with that particular style. Individuals can be elevated in more than one area.

Table 16 - Inventory #7 Results (Mehrabian Sensitivity to Rejection Scale)

Pastor's ID	Sensitivity to Rejection Level	Percentile Lower	Pastor's ID	Sensitivity to Rejection Level	Percentile Lower
A	Average	50%	N	Slightly Low	31%
B	Average	50%	O	Moderately High	84%
C	Slightly High	69%	P	Extremely High	98%
D	Average	50%	Q	Average	50%
E	Moderately High	84%	R	Very High	93%
F	Average	50%	S	Average	50%
G	Slightly Low	31%	T	Average	50%
H	Very High	93%	U	Slightly High	69%
I	Average	50%	V	Slightly High	69%
J	Slightly High	69%	W	Average	50%
K	Moderately High	84%	X	Moderately High	84%
L	Average	50%	Y	Average	50%
M	Very Low	7%	Z	Moderately High	84%

Note: Mehrabian offers general population norms against which the individual scores can be compared. His norms range from very extremely low (.6%) to very extremely high (99.4%).

Table 17 - Perfectionism Self-Report

Pastor's ID	Self-Report Perfectionism Rating	Pastor's ID	Self-Report Perfectionism Rating
A	4	N	4 – 4.5
B	1 – 2	O	2
C	4	P	4
D	3	Q	3
E	5	R	5
F	4	S	3.5
G	3	T	4
H	3	U	4
I	4	V	3
J	3	W	5
K	1	X	4 – 5
L	4	Y	5
M	4	Z	5

Key:

Scale is 1-5 with one being not at all and 5 being definitely.

Table 18 - Inventory #8 Results (Hewitt and Flett Multidimensional Perfectionism Scale)

Pastor's ID	Self-Oriented Perfectionism	Other-Oriented Perfectionism	Socially Prescribed Perfectionism
A	High/+ 1.75 deviations	High/+1.75 deviations	Below
B	Below	Average	Below
C	Below	Average	Below
D	Below	Below	Average
E	Below	Average	Moderate/.5 to 1 deviation
F	High/+1.5 deviations	Average	High/+1.25 deviations
G	Moderate/+.5 to 1 deviation	Average	High/+1 deviation
H	Below	Moderate/+.5 to 1 deviation	Below
I	Below	Average	Below
J	Below	Below	Below
K	High/+1.5 deviations	Below	High/+1.25 deviations
L	Average	High/+1.25 deviations	Average
M	Below	Below	Below
N	Average	Average	Below
O	Average	Average	Below
P	Average	Moderate/+.5 to 1 deviation	Average
Q	Below	Below	Below
R	Moderate/+.5 to 1 deviation	High/+1 deviation	Moderate/.5 to 1 deviation
S	Below	Below	Below
T	Below	Below	Below
U	Below	Below	Below
V	Below	Below	Below
W	Below	Below	Below
X	High/+2 deviations	High/+1.5 deviations	High/+2.5 deviations
Y	Average	Moderate/+.5 to 1 deviation	Average
Z	Below	Below	Below

Note: Raw scores are totaled for the three areas and then converted to scores that allow for comparison to general population norms. The comparison will either be below the mean and indicating no concern of perfectionism, around the mean and be considered average, between one-half and one standard deviation above the mean and be considered moderate or one standard deviation or above the mean and be considered elevated or high. The above Table indicates at what level each pastor scored and, where applicable, how far above the mean their scores fell.

Table 19 - Inventory #5 Results (Frost Multidimensional Perfectionism Scale)

Pastor's ID	CM	PS	PE	PC	DA	ORG	TOTAL SCORE
A	3.78	4.29	4.8	4	4	4.33	4.13
B	2.2	2.86	2	2.25	2	4	2.3
C	3.56	4	3.2	3	4	4	3.59
D	3.89	4.43	4.6	3.5	3.5	4	4
E	3.84	4.71	4.2	3.75	3.5	3	4.07
F	1.88	2.57	2.6	4.25	2	3.6	2.52
G	1.89	3.14	1.8	2	2	3.67	2.21
H	1.67	2.71	3.2	2.25	1.75	5	2.28
I	2.67	3.71	2	2	3.25	4	2.79
J	1.11	2.29	2.4	1.25	1.25	4.83	1.66
K	1.67	3.43	2.2	2.75	2	4.17	2.38
L	2	2	1.8	1.5	1	3.3	1.76
M	3	4.43	1.2	2.25	2.5	4.17	2.86
N	1.33	3.42	1.8	1.5	2.25	3.5	2.07
O	3.4	3.4	3	3	3.75	2.3	3.34
P	4.22	4.29	3.6	3	4	4.17	3.93
Q	1.89	3	2.4	2	2.25	3.83	2.31
R	2.44	4.71	4.4	5	4	4.83	3.48
S	3.44	3.71	1.4	2.75	3.5	4.5	3.07
T	1.89	2.29	2.4	2	2	3.17	2.1
U	2	4	2.7	2.5	2.5	4	2.79
V	1.89	3.57	2	2.5	1.5	4.17	2.34
W	1.33	2.43	2	1.5	1.75	4.83	1.79
X	2.67	4	1.4	2.25	1.5	4.5	2.55
Y	1.89	3.43	3.4	3	1.75	4.17	2.65
Z	3.67	4	1.8	4	2.5	4.5	3.31

Key:

CM = Concern over mistakes

PS = Personal Standards

PE = Parental Expectations

PC = Parental Criticism

DA = Doubting Actions

ORG = Organization

TOTAL SCORE = Sum of CM, PS, PE, PC, DA (does not include organization subscale)
divided by 29 items (35 total items minus 6 from organization = 29)

Table 20 - Inventory #3 Results (Mehrabian Balanced Emotional Empathy Scale)

Pastor's ID	Empathy Level	Percentile Lower	Pastor's ID	Empathy Level	Percentile Lower
A	Moderately Low	16%	N	Very High	84%
B	Moderately High	84%	O	Slightly Low	31%
C	Average	50%	P	Slightly High	69%
D	Moderately Low	16%	Q	Average	50%
E	Moderately High	84%	R	Moderately High	84%
F	Moderately Low	16%	S	Extremely High	98-99.4%
G	Moderately Low	16%	T	Average	50%
H	Moderately Low	16%	U	Average	50%
I	Moderately Low	16%	V	Slightly High	69%
J	Moderately High	84%	W	Very High	93%
K	Slightly High	69%	X	Extremely High	98%
L	Moderately High	84%	Y	Moderately Low	16%
M	Moderately Low	16%	Z	Slightly High	69%

Note: Mehrabian offers general population norms against which the individual scores can be compared. His norms range from very extremely low (.6%) to very extremely high (99.4%).

Table 21 - Inventory #4 Results (Baron-Cohen Reading the Mind in the Eyes Test)

Pastor's ID	Score	Level	Pastor's ID	Score	Level
A	29	Elevated/+.75 deviation	N	21	Very Low
B	30	Elevated/+1.0 deviation	O	21	Very Low
C	27	Average	P	29	Elevated/+.75 deviation
D	27	Average	Q	28	Elevated/+.5 deviation
E	23	Low	R	27	Average
F	28	Elevated/+.5 deviation	S	28	Elevated/+.5 deviation
G	28	Elevated/+.5 deviation	T	31	Elevated/+1.25 deviation
H	29	Elevated/+.75 deviation	U	22	Low
I	33	Elevated/+2.0 deviation	V	29	Elevated/+.75 deviation
J	28	Elevated/+.5 deviation	W	25	Average
K	27	Average	X	29	Elevated/+.75 deviation
L	24	Low	Y	27	Average
M	28	Elevated/+.5 deviation	Z	25	Average

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Vita

Raymond A. Richards II was born in Rochester, NY on March 1, 1961. He was raised in the village of Webster, New York. After graduation from H.W. Schroeder High School in 1979, he attended Oral Roberts University in Tulsa, OK and Gordon College in Wenham, MA. From Gordon, he received the Bachelor of Arts degree in Biblical Studies in 1983. He served as Minister of Youth at Spencerport Assembly of God in Spencerport, NY for four years before returning to school in 1987 to earn his Master of Divinity degree from Gordon-Conwell Theological Seminary in 1990. Upon completion of his studies, he was called to serve as pastor at Calvary Assembly of God in Cobleskill, NY, a position he has held for the past seventeen and a half years. Raymond has been married to Giselle for 22 years and they are the parents of four children, David, Jonathan, Benjamin and Hannah. This project is presented in partial fulfillment for the requirements of the Doctor of Ministry degree from Gordon-Conwell Theological Seminary. His expected graduation date is May 2008.